Office of Financial Aid, Kent Wyatt Hall 144, Cleveland, MS 38733 P: (662)846-4670 F: (662)846-4683 E: finaid@deltastate.edu

2025-2026 V4 Verification Worksheet Dependent/Independent

Your 2025-2026 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law states before awarding Federal Student Aid, we may ask you to confirm the information you and your parents reported on your FAFSA. To verify that you provided correct information, the financial aid administrator at Delta State will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete, sign, and submit all required documents to the financial aid office by the published deadline. The financial aid office may ask for additional information. If you have any questions concerning the verification process, please contact the financial aid office as soon as possible so that your financial aid will not be delayed.

A. STUDENT INFORMATION

Last Name	First Name	Middle Name	Student ID Number	
Address			Email Address	
			()	
City	State	Zip Code	Phone Number	
B. IDENTITY	AND STATEMENT OF EDU	JCATIONAL PURPOSE		
If Signed at the	Institution:			
issued photo id maintain a copy	entification (ID), such as, bu	t not limited to, a driver's license	her identity by presenting an unexpired valid government e, other state-issued ID, or passport. The institution will was received and the name of the official at the institutio	
		Statement of Education (To be signed at the Delta State Off	•	
I,student financia University for 2	al assistance I may receive w		is Statement of Educational Purpose and that the federal ourposes and to pay the cost of attending Delta State	
Student's Signature			Date	
Student's ID Nu	umber			
		For Financial Aid Office (Jse Only	
I have	reviewed the front and back copy (of the unexpired valid government-issue	d photo identification (ID) that was presented with this form.	
	FA Staff Nar	me	Date	
		FA Staff Signature		

tudent Name			Student ID Number		
If NOT Signed	d at the Institution (To be si	gned with Notary):			
If the student	t is unable to appear in pers	son at Delta State Unive	ersity to verify his or her identi	ty, the student must provide:	
limited to a d		issued ID, or passport;	and the original notarized State	notary statement below, such as but not ement of Educational Purpose provided	
		Statement o	of Educational Purpose		
	cial assistance I may receiv			ucational Purpose and that the federal ay the cost of attending Delta State	
Student's Sign	nature		Date		
Student's ID N	Number				
		Notary's Certifica	te of Acknowledgement		
			on		
		, personally appear	red,	, and provided to me on basis of	
	(notary's name)		ppeared,, and provided to me on basis of (student's name)		
satisfactory e			to be above-named person who signed the		
		(Type of government-i	ssued photo ID provided)		
foregoing inst	trument.				
WITNESS my	hand and official seal				
			Notary Signature		
My commission	on expires on	(Date	e)		

Equal Access Statement

Delta State University is committed to maintaining a learning and working environment free from sexual and gender-based discrimination or harassment. Our goal is for all to have equal access to the many great services and opportunities we offer. For more information, or to report an incident, see https://www.deltastate.edu/titleix/ or email titleix@deltastate.edu.