

Student Name

2024-2025 V4 VERIFICATION FORM (OFFICE)

otadent Name.	or is rumber.
Your 2024-2025 Free Application for Federal Student Aid (FAFS) for a process called verification. Institutions are mandated by T based on specific criteria established by the ED before disbursin Student Financial Aid (OSFA) will compare information from you other financial documents.	itle IV (federal) regulations to verify FAFSA information ng federal student aid. The University of Iowa Office of
You must complete this form and sign in front of an OSFA staff government-issued photo identification (ID), such as, but not limpassport. This document will NOT be accepted by mail, fax, or	nited to, a driver's license, other state-issued ID, or
We will start the review process in April 2024. It takes a minimu reviewed. If additional documentation is required after initial revulue of the semail regularly for financial aid processing updates. To avoid in at least six weeks before the start of the semester that you reverification procedures and deadlines visit financialaid.uiowa.ed	riew, processing time will be extended. Please check your delays in aid disbursement, please have the form turned eed the disbursement. For more information about
This document will NOT be accepted by mail, fax, or email. You presence of an OSFA staff member.	ı must bring both pages to our office to complete in the
Student's signature	 Date

III ID Number

Student Name:	UI ID Number:	UI ID Number:	
A. Verification of Student's Identity			
government-issued photo identification (ID)	person at The Office of Student Financial Aid an), such as, but not limited to, a driver's license, o r photo ID. If you are not taking classes on cam	ther state-issued ID, or	
On ,		personally appeared, and	
(Date)	(Student's Name)		
provided to me an unexpired			
(Type of Go	overnment-Issued Photo ID Providedi.e., driver's license, pa	ssport)	
(Received By —OSFA Staff Printed Name)	(Received By— OSFA Staff Signature)	(Date)	
B. Statement of Educational Purpose			
The student must sign the following in the	presence of an OSFA staff member:		
this Statement of Educational Purpose and	(print student's name) that the federal student financial assistance I m st of attending The University of Iowa for the 20	ay receive will only be used	
Student's Signature	Date	Student's UI ID Number	