SETON HALL UNIVERSITY

(Student's Signature)

2013-2014 High School Completion, Identity, Statement of Educational Purpose SNAP and Child Support Paid (V4)

INDEPENDENT

Your financial aid application has been selected for a process called "Verification." Upon completion of this review, we will send corrections as needed to the Office of Federal Student Aid. Subsequently, an update of your financial aid awards will be forwarded to you. All students will be able to view their final awards on the Student Self-Service system. Additionally, please note that all documentation must be submitted before October 1, 2013 for consideration of any Institutional Grant Funding. Exceptions to this date will not be considered.

Student Name:		SHUID:	SS#
(Please print) Last	First	MI	
Address:			
Street	City	State	Zip
Home Phone: ()		Cellular Phone: ()
A. High School Complet	ion Status		
Provide <u>one</u> of the following begin college in 2013–2014:	documents that indi	cate the student's high so	chool completion status when the student w
 A copy of the student's C An academic transcript the for full credit toward a base of the state law requires a houng to the state law does not require homeschool (other than a the student's parent or gusuccessful completion of the student of the stud	inal official high schooleneral Educational I hat indicates the stude achelor's degree. In the student of the s	Development (GED) certi- ent successfully complete to obtain a secondary sch- nized equivalent), a copy student to obtain a seconda a or its recognized equival secondary school courses education in a homeschool	ed at least a two-year program that is acceptated at least a two-year program that is acceptated ool completion credential for homeschool of that credential. dary school completion credential for lent), a transcript or the equivalent, signed by the student completed and documents the
——————————————————————————————————————			ie must contact the imancial aid office.
B. Identity and Statemen	nt of Educational	Purpose (To Be Signed	l at the Institution)
government-issued photo ide	ntification (ID), such maintain a copy of the	as, but not limited to, a conhe student's photo ID that	or her identity by presenting a valid driver's license, other state-issued ID, or a sannotated with the date it was received an ID.
In addition, the student must	sign, in the presence	of the institutional officia	al, the following:
Statement of Educational P	urpose		
I certify that I(Print Student's and that the federal student fit cost of attending Seton Hall	Name) inancial assistance I r	may receive will only be u	ng this Statement of Educational Purpose used for educational purposes and to pay the

(Date)

(Student's ID Number)

C. Identity and Statement of Educational Purpose (To Be Signed With Notary)

If the student is unable to appear in person at <u>Seton Hall University</u> to verify his or her identity, the student must provide:

- (a) A copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to a driver's license, other state-issued ID, or passport; and
- (b) The original notarized Statement of Educational Purpose provided below.

Statement of Educational Purpose

I certify that I	am the individua	ıl signing this Statement of Educational Pu	rnose
I certify that I(Print Student's Name) and that the federal student financial assistance I n cost of attending Seton Hall University for 201	nay receive will or		
(Student's Signature)	(Date)	(Student's ID Number)	
Notary's Certificate of Acknowledgement			
State of			
City/County of			
On, before me,		,	
(Date)	(Notary's nan	ne)	
personally appeared,(Printed name of signer)		, and provided to me	
on basis of satisfactory evidence of identification (Type of governme	ent-issued photo ID provided)	
to be the above-named person who signed the fore	egoing instrument.		
WITNESS my hand and official seal (seal)	(NI	otary signature)	
My commission expires on		otary signature)	
(Date)			

Receipt of Supplemental Nutrition Assistance Program (SNAP) Benefits

Spouse Signature:

			, received benefits from the Supplementm) sometime during 2011 or 2012.	ntal Nutrition Assistance			
□ YES							
\square NO							
The studer	nt's household inclu	ades:					
•	The student.						
•	The student's spouse, if the student is married.						
•	The student's or spouse's children if the student or spouse will provide more than half of their support from July 1, 2013, through June 30, 2014, even if the children do not live with the student.						
•	Other people if they now live with the student and the student or spouse provide more than half of their support and will continue to provide more than half of their support through June 30, 2014.						
Note: If we have reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, we may require documentation from the agency that issued the SNAP benefits in 2011 or 2012. SNAP may be known by another name in some states. For assistance in determining the name used in a state, please call 1-800-4FED-AID (1-800-433-3243).							
Child Sup	port Paid						
the person children for child.	s who paid the child s	d support, the names of the perso support was paid, and the total and	ehold, and paid child support in 2012. I ons to whom the child support was paid nual amount of child support that was	d, the names of the paid in 2012 for each			
If more sp	ace is needed, prov	ide a separate page that includes t	the student's name and ID number at the	ne top.			
	of Person Who Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support Was Paid	Amount of Child Support Paid in 2012			
	e have reason to be ation, such as:	elieve that the information regardi	ng child support paid is not accurate, w	e may require additional			
■ A copy	y of the separation	agreement or divorce decree that	shows the amount of child support to	be provided;			
■ A state	ement from the ind	ividual receiving the child suppor	t certifying the amount of child suppor	t received; or			
Copies	of the child suppo	ort payment checks or money ord	er receipts.				
I give perminformation information	provided on this for on this form, I am l		_				
Student Sign	rature:		Date:				

Date: _____