## Office of Financial Aid

Custom Verification (V4) Independent Student 2023-2024 Verification of information filled out on FAFSA identified by Department of Education that may not match records.



STUDENT INF	ORMATION	
Student Name:	Student ID:	
Student Address:	Student Date of Birth:	
City, State, Zip:	Student Email:	
Student Phone:	Student Alternate Phone:	
PROOF OF	IDENTITY	
the name of the official at the institution authorized to colle  Not in Person:  If the student is unable to appear in person at Grayson Colle institution a copy of the unexpired valid government-iss	ot limited to, a driver's license, other state-issued ID, or e's photo ID that is annotated with the date it was received and cet the student's ID.  The ege to verify their identity, the student must provide to the	
STATEMENT OF EDU	CATIONAL PURPOSE	
In Person: The student must sign, in the presence of the institutional of	official, the Statement of Educational purpose provided below:	
Statement of Educational Purpose		
I certify that I, am the is and that the Federal student financial assistance I may recepay the cost of attending Grayson College for 2023-2024.	ndividual signing this Statement of Educational Purpose ive will only be used for educational purposes and to	
(Student Signature)	(Student ID Number) (Date)	
Not in Person:  If the student is not able to appear in the presence of the in Purpose, provided above, must be notarized.	nstitutional official, the original Statement of Educational	

State of	City/County of	
On	, before me,	personally appeared,
(date)	(Printed	name of Notary)
	, and provided to	o me on basis of satisfactory evidence of identification
(Printed	I name of Signer)	
	4- h- 4h1	
(Type of unexpired, gov	vernment-issued ID provided)	d person who signed the forgoing instrument.
(Type of unexpired, gov	vernment-issued ID provided)	d person who signed the forgoing instrument.
	vernment-issued ID provided)	d person who signed the forgoing instrument.
WITNESS my ha	vernment-issued ID provided)	d person who signed the forgoing instrument.
WITNESS my ha	nd and official	d person who signed the forgoing instrument.
WITNESS my ha	nd and official	(Notary's Signature)
WITNESS my ha	nd and official  spires on	
WITNESS my ha	repires on(Date)	(Notary's Signature)
WITNESS my ha	nd and official  spires on	(Notary's Signature)

**Student Signature:** 

Date:

**Student Printed Name:** 

Send forms to: Grayson College Financial Aid Office 6101 Grayson Drive, Denison, TX 75020-8299 Email forms to: <a href="mailto:financialaid@grayson.edu">financialaid@grayson.edu</a> Fax forms to: 903.463.3908

Students are REQUIRED to use their GC canvas account or their GC email account for all electronic communication. GC faculty and staff will not reply to student communication that is sent through an email account other than their GC issued email account or canvas account in order to ensure the identity of the student when communicating electronically.