



2024-2025 Customized Verification Worksheet Independent Student

4301 Broadway, Box 308
San Antonio, TX 78209
Phone: (210) 829-6008
Fax: (210) 283-5053
finaid@uiwtx.edu
www.uiw.edu/finaid
Revised 02/2024

Black Ink Only

VCUI05

Your 2024-2025 FAFSA was selected for verification by the Dept. of Education, requiring us to confirm your identity via photo identification. You are required to complete the verification process in order to receive financial aid. The Office of Financial Assistance may request additional information or documents in order to complete verification. Please respond with all documentation within 14 days. Please allow 3-5 business day for review. More information is available at uiw.edu/finaid.

Student Name Student ID Student Phone Number (include area code)

Indicate which option you will choose to verify your identity and complete your statement of educational purpose:

- OPTION 1: In Person at the UIW Office of Financial Assistance (see below)**
- OPTION 2: Remote using a notary (skip to page 2) Cannot be accepted via fax, email, or online submission.**
Zoom meeting with UIW Financial Assistance Advisor will also be required for remote option.

OPTION 1: IN PERSON Identity and Statement of Educational Purpose (To be signed at the UIW OFA)

The student **must appear in person** at the Office of Financial Assistance at the University of the Incarnate Word to verify their identity by presenting a valid government-issued photo identification (ID), such as, but not limited to, a driver’s license, other state-issued ID, or passport.

The institution will maintain a copy of the student’s photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect the student’s ID. In addition, the student must sign, in the presence of the institutional office, the statement below.

Step 1: Statement of Educational Purpose

I certify that I, _____ am the individual signing this Statement of Educational
(Print Student’s Name)

Purpose and that the federal student financial assistance I receive will only be used for educational purposes and to pay the cost of attending the University of the Incarnate Word for the 2024-2025 academic year.

Student’s Signature: _____ Date: _____

UIW Official’s Signature: _____ Date: _____

Step 2: Certification and Signature

I certify that all information reported on this worksheet is complete and accurate. I understand if I purposely give false or misleading information on this worksheet, I may be fined, sentenced to jail, or both.

Student Signature (Required) Date (Required)

*All signatures must be **handwritten** in black ink only. Electronic/typed signatures and signatures made with an electronic pen will **not** be accepted.

For UIW Office of Financial Assistance Use Only:

- Obtained a copy of valid government-issued photo ID
- Annotated date received and name of UIW official on copy of photo ID

OPTION 2: REMOTE

Identity and Statement of Educational Purpose (must include notary signature)

If the student **is unable to appear in person** at the University of the Incarnate Word to verify their identity, the student must provide a copy of a valid government-issued photo identification (ID), such as, but not limited to, a driver’s license, other state-issued ID, or passport. The copy of the government-issued photo identification (ID) must be the same one that is acknowledged in the notary statement below. The copy must be presented to the notary at the same time the statement below is signed.

- **Students needing to complete the Customized Verification Worksheet remotely must submit the form by mail with original signature; cannot be accepted via fax, email, or online submission.**
- **The UIW Office of Financial Assistance will reach out to the student via email once the worksheet is received to schedule a Zoom appointment.**

Step 1: Statement of Educational Purpose

I certify that I, _____ am the individual signing this Statement of Educational
(Print Student’s Name)

Purpose and that the federal student financial assistance I receive will only be used for educational purposes and to pay the cost of attending the University of the Incarnate Word for the 2024-2025 academic year.

Student’s Signature: _____ **Date:** _____

Step 2: Notary’s Certificate of Acknowledgement

Notary’s Certificate of Acknowledgment

State of _____ City/County of _____

On (date) _____, before me, _____,
(Notary’s name)

personally appeared _____ and provided to me on basis of
(Printed name of student)

satisfactory evidence of identification _____.
(Indicate type of government-issued photo ID (e.g., driver’s license, passport))

The identification number and expiration date listed on the ID is _____
(Identification number) (Exp. date)

Witness my hand and official seal _____ (SEAL)

Printed name: _____

My commission expires on (date) _____

Step 3: Certification and Signature

I certify that all information reported on this worksheet is complete and accurate. I understand if I purposely give false or misleading information on this worksheet, I may be fined, sentenced to jail, or both.

Student Signature (Required)

Date (Required)

*All signatures must be **handwritten** in black ink only. Electronic/typed signatures and signatures made with an electronic pen will **not** be accepted.