

Your 2023-2024 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that 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 your school 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 and sign this worksheet, attach any required documents, and submit the form and other required documents to the Financial Aid Office at East Central Community College. You may be asked for additional information. If you have questions about verification, contact your Financial Aid Office as soon as possible so that your financial aid will not be delayed.

**Section A: Student Information**

Student's Last Name	Student's First Name	Student's M.I.	Student's ECCC ID Number (Required)
Student's Street Address (include apt. no.)			Student's Date of Birth
City	State	Zip Code	Student's Email Address
Student's Phone Number (include area code)			Last 4 digits of Student's Social Security Number

**Section B: Identify and Statement of Educational Purpose**

The Student must appear in person at East Central Community College to verify his or her identity by presenting an unexpired 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 by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

In addition, the student must sign the Statement of Educational Purpose in the presence of a Financial Aid Administrator at ECCC. If the student is unable to come to the office, in person, then this document must be signed in the presence of a Notary.

**STATEMENT OF EDUCATIONAL PURPOSE**

I certify that I, \_\_\_\_\_ (print student name) am the individual signing this Statement of Educational Purpose and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending East Central Community College for 2023-2024.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Financial Aid Administrator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Notary's Certificate of Acknowledgement**

State of \_\_\_\_\_ City/County of \_\_\_\_\_ on \_\_\_\_\_ before  
(Date)

me, \_\_\_\_\_ personally appeared, \_\_\_\_\_ and  
(Notary's Name) (Name of Student)

proved to me on the basis of satisfactory evidence of identification \_\_\_\_\_ to be the above-  
(Type of unexpired government-issued photo ID)

named person who signed the foregoing instrument.

Notary Signature: \_\_\_\_\_

**WITNESS my hand and official seal**

My commission expires on: \_\_\_\_\_

(SEAL)



**Section E: Certification and Signatures**

**WARNING: IF YOU PURPOSELY GIVE FALSE OR MISLEADING INFORMATION ON THIS WORKSHEET, YOU MAY BE FINED, PROSECUTED FOR FRAUD, SENTENCED TO JAIL, AND/OR FACE OTHER CHARGES, AND WILL HAVE TO REPAY ANY FINANCIAL AID FUNDS YOU RECEIVED.**

Each person signing below certifies that all of the information reported is complete and correct. The student (and one parent whose information was reported on the FAFSA if the student is considered “dependent”) must sign and date.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature (Dependent Student Only)

\_\_\_\_\_  
Date

**Due to the need for original signatures, a faxed or scanned copy of this form will not be accepted.**

East Central Community College Financial Aid Office  
P O Box 129 Decatur, MS 39327  
PH 601-635-6326 FAX 601-635-5216

East Central Community College is an equal educational and employment opportunity provider.