



Date Rev: _____
By: _____

2026-2027 (V4) Dependent Student Verification Worksheet

Your 2026–2027 Free Application for Federal Student Aid (FAFSA) was selected for review in a verification process. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you 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 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 to the financial aid administrator at your school. Your school may ask for additional information. If you have verification questions, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

Dependent Student Information

_____	_____	_____	_____
Student's Last Name	Student's First Name	Student's M.I.	Student's SFSC ID Number
_____			_____
Student's Street Address (include apt. no.)			Student's Date of Birth
_____	_____	_____	_____
City	State	Zip Code	Student's Email Address
_____			_____
Student's Cellphone Number (include area code)			Student's Alternate or Home Phone Number

Form Instructions

To complete this form, you must either appear in person with one parent whose information was reported on the FAFSA at SFSC, schedule a Zoom meeting **OR** have this form signed in the presence of a notary.

To Be Signed at SFSC

The student must appear in person at **South Florida State 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.

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

Certification and Signature:

Each person signing below certifies that all of the verification documents submitted with this certification are complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

_____	_____
Student's Signature (Required)	Date
_____	_____
Parent's Signature (Required)	Date
_____	_____
SFSC Staff Member Signature (Required)	Date

Student's Name: _____ ID: _____

Video Call Option:

On, _____ before me, _____
(Date) (FAO)

_____ appeared on video call (Zoom) and proved to me satisfactory (Name of Student)

evidence of identification. _____ (Type of unexpired government-issued photo provided)

(FAO Signature) (Date)

**Identity Purpose
To Be Signed in the Presence of a Notary**

If the student is unable to appear in person at **South Florida State College** to verify his or her identity, the student must provide to the institution:

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to a driver's license, other state-issued ID, or passport

Notary's Certificate of Acknowledgement

State of _____ City/County of _____

On _____, before me, _____,
(Date) (Notary's Name)

personally appeared, _____, and proved to me on the
(Printed Name of Signer)

basis of satisfactory evidence of identification _____ to be
(Type of Unexpired Government-Issued Photo ID Provided)

the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

(Notary Signature) (seal)

My commission expires on _____.
(Date)

Please submit all documents to SFSC Financial Aid Office
600 West College Drive, Building B, Avon Park, FL 33825
OR email: financialaid@southflorida.edu