

SECTION A: Student's Information

Office of Financial Aid

Springfield ID#:

Your 2025-2026 FAFSA was selected for a review process known as verification. This means that you are now required to complete and return this worksheet to Springfield College Office of Financial Aid. We will verify your identity and confirm your eligibility for federal and institutional aid. If you have any questions, please contact us at 413.748.3108 or via email at financialaid@springfieldcollege.edu.

Student's Last Name	First Name	M.I.	Student's Date of Birth
Student's Street Address (include apt. number)			Student's Phone Number
City	State	Zip	Student's Email Address
SECTION B: Identity Ve	rification:		
valid government-issued photo passport. The institution will r	o identification (ID), such as maintain a copy of the studer	, but not limitent's photo ID t	fy his or her identity by presenting an unexpired ed to, a driver's license, other state-issued ID, or hat is annotated by the institution with the date it authorized to receive and review the student's
identity remotely. The student	ge.edu to schedule an appoir must present an unexpired se, other state-issued ID, or p	ntment with a fi	08 or via email at inancial aid representative who will verify your ent-issued photo identification (ID), such as, but oom meeting and consent to having the Zoom
	For Springfiel Authorization form whic	-	•
Name of Springfield College employee			
Signature of authorized Springfield College employee			
Date viewed documents and	l signing statement		

Student's Name:	Springfield ID#:
SECTION C: Certification and Signatures Each person signing below certifies that all of the information r and date.	reported is complete and accurate. The student must sign
Referral of Fraud Cases	
If we suspect that a student, employee, or other individual has refraudulently to obtain federal funds, we are required to report of Inspector General.	
WARNING: If you purposely give false or misleading infor	mation you may be fined, sentenced to jail, or both.
Student's signature (ink)	Date
Please submit this completed form to the Office of Financial Ai 01109-3797.	id, Springfield College, 263 Alden Street, Springfield, MA
Thank you for your assistance with the verification process.	

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