



Saint Martin's  
UNIVERSITY

2020-2021

**HS Status/Educational Purpose  
Independent  
(V4)**

**Mail:** Saint Martin's University  
Student Financial Services Office  
5000 Abbey Way SE  
Lacey, WA 98503  
**P:** (360) 438-4397  
**F:** (360) 412-9190

Your application has been selected for review in a process called "Verification". In this process, the information from your Free Application for Federal Student Aid (FAFSA) will be compared with you and your family's actual information as well as other documents. If there are differences, your FAFSA information may need to be corrected. You and your spouse (if applicable) **must complete all sections of this worksheet, attach all required documents and return them to the Student Financial Services Office.**

**STUDENT INFORMATION**

_____ Last Name	_____ First Name	_____ M.I.	_____ SMU ID Number
_____ Address (include apartment number)			_____ Date of Birth
_____ City	_____ State	_____ Zip	_____ Phone number (include area code)

**HIGH SCHOOL COMPLETION STATUS**

You must submit documentation of your high school completion status: (e.g.: a copy of your high school diploma, final transcript, General Educational Development (GED) Certificate or State certificate received as a result of passing a State-authorized examination).

**IDENTITY/EDUCATIONAL PURPOSE STATEMENT**

You **MUST** appear in the Student Financial Services Office in person and present a valid government-issued photo identification (driver's license, non-driver's license document, or passport).

In addition, you will be required to sign a **Statement of Educational Purpose** **WHEN YOU ARE IN THE SFS OFFICE.**

**CERTIFICATIONS AND SIGNATURES**

By signing this worksheet, I/we certify that all of the information reported is complete and correct. I/We also acknowledge that I/we have read and agree to comply with all verification policies as stated by the University. **Failure to submit information in a timely fashion may result in the application being filed as inactive** with no further consideration and no federal aid for the academic year. Student must sign:

_____ Student	_____ Date	_____ Spouse	_____ Date
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**WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.**