### 2018–2019 TUSM Verification Worksheet (V4)

Your 2018–2019 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 must ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this institutional verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. Please complete and sign the TUSM institutional verification document, attach any required documents, and submit the form and other required documents to the Office of Financial Aid. We may ask for additional information after reviewing this document. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

#### A. Student’s Information

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>M.I.</th>
<th>Student ID Number or SSN</th>
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<thead>
<tr>
<th>Address</th>
<th>Date of Birth</th>
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<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Email Address</th>
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<th>Home Phone Number</th>
<th>Cell Phone Number</th>
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#### B. High School Completion

Provide one of the following documents that indicate the student’s high school completion status when the student will begin college in 2018–2019:

- [ ] A copy of the student’s high school diploma.
- [ ] For students who completed secondary education in a foreign country, a copy of the “secondary school leaving certificate” or other similar document.
- [ ] A copy of the student’s final official high school transcript that shows the date when the diploma was awarded.
- [ ] A state certificate or transcript received by a student after the student passed a State-authorized examination that the State recognizes as the equivalent of a high school diploma (GED test, HiSET, TASC, or other State-authorized examination).
- [ ] An academic transcript that indicates the student successfully completed at least a two-year program that is acceptable for full credit toward a bachelor’s degree.
- [ ] For a student who was homeschooled in a state where state law requires the student to obtain a secondary school completion credential for homeschooling (other than a high school diploma or its recognized equivalent), a copy of that credential.
- [ ] For a student who was homeschooled in a state where state law does not require the student to obtain a secondary school completion credential for homeschooling (other than a high school diploma or its recognized equivalent), a transcript, or the equivalent, signed by the student's parent or guardian, that lists the secondary school courses the student completed and includes a statement that the student successfully completed a secondary school education in a homeschool setting.
If the student is unable to obtain the documentation listed above, he or she must contact the financial aid office.

C. Verification Identity and Statement of Educational Purpose

The student must appear in person at Tufts University’s School of Medicine Office of Financial Aid 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.

The student must complete and sign in the presence of a TUSM Financial Aid Staff member. If unable, the student must sign this in front of a notary AND PROVIDE A COPY OF THE UNEXPIRED VALID GOVT ISSUED IDENTIFICATION ACKNOWLEDGED BY NOTARY:

Statement of Educational Purpose

I certify that I, _____________________________, am the individual signing this Statement of Educational Purpose and (Student’s name) that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Tufts University School of Medicine for 2018-2019.

________________________________    ___________________ ______________________
Student’s Signature      Date     Student’s ID Number

TUSM FINANCIAL AID OFFICE USE ONLY

Verification of Government Issued ID (check which document is copied for review)

__________Driver’s License _________Non-Driving State ID __________Military ID _________Passport

Received by: ______________________  Signature: ______________________ Date: __________________
THE NOTARY’S CERTIFICATE OF ACKNOWLEDGEMENT IS ONLY REQUIRED IF YOU ARE UNABLE TO COMPLETE AND SIGN THE ABOVE STATEMENT OF EDUCATIONAL PURPOSE, AND WITNESSED BY A TUSM FINANCIAL AID STAFF MEMBER. IF SO, YOU MUST SIGN THE ABOVE STATEMENT OF EDUCATIONAL PURPOSE IN THE WITNESS OF A NOTARY PUBLIC AND ATTEST TO THE FOLLOWING:

Statement of Educational Purpose

I certify that I, _____________________________, am the individual signing this Statement of Educational Purpose and

(Student’s name)

that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Tufts University School of Medicine for 2018-2019.

________________________________    ___________________ ______________________

Student’s Signature      Date     Student’s ID Number

Notary’s Certificate of Acknowledgement

State of ____________________ City/County of ___________________________ On___________________

before me, ____________________________, personally appeared, ___________________________ and

(Notary’s name)     (printed name of signer)

proved to me on basis of satisfactory evidence of identification _________________________________________

(Type of unexpired government-issued photo ID provided)

to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal ____________________________________________

(Notary signature)        (Date Commission Expires)

(Seal)

Certification and Signature

By signing below, I certify that all of the information reported is complete and accurate.

________________________________________ ________________________________________________

Student’s Name     Student’s Signature    Date

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