

Oklahoma State University- Center for Health Science  
College of Osteopathic Medicine  
2024-2025 Verification Worksheet – Independent V4

---

Your Free Application for Federal Student Aid (FAFSA) was selected for a process called verification. Federal regulations require that we check the accuracy of the information provided on the 2024-2025 FAFSA. Final eligibility for financial aid cannot be determined until the requested documentation is received and reviewed.

_____	_____	_____	_____
Last Name (print)	First Name	MI	Student ID #

**Identity and Statement of Educational Purpose**

---

The student **must appear in person** at OSU-CHS (Financial Aid Department) to verify his or her identity by **presenting a 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 with the date it was received and the name of the official at the institution authorized to collect the student’s ID. If the student cannot appear in person, the document and copies of ID may be completed and emailed to [chsfinaid@okstate.edu](mailto:chsfinaid@okstate.edu)**

**Statement of Educational Purpose**

I certify that I \_\_\_\_\_ am the individual signing this Statement of Educational  
(Print Student’s Name)

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: \_\_\_\_\_ for 2024-2025.  
(Name of Postsecondary Educational Institution)

**Certification and Signature**

---

Signing this worksheet certifies that all the information reported on it is complete and correct.

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

\_\_\_\_\_  
Signature of OSU-CHS representative Date