## **Pepperdine Law School**

## 2018–2019 V4 Custom Verification Worksheet Independent Student

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 may 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. You must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to us. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

Student's Last Name	First Name	M.I.	Campus Wide ID (CWID)	
Student's Street Address (include apt. no.)			Student's Date of Birth	
City State Zip Code			Student's Email Address	
Student's Home Phone Number (include area code)			Student's Alternate or Cell Phone Number	
Section 2 - Child Sup	port Paid			
Did you or your spouse (if Yes	married) pay child supp	port in 20	16?	
No If yes, please, provide the if	•	that inclu	des the student's name and ID number at the t	

Name of Person Who	Name of Person to Whom	Name of Child for Whom	Amount of Child
Paid Child Support	Child Support was Paid	Support Was Paid	Support Paid in
			2016

Note: If we have reason to believe that the information regarding child support paid is not accurate, we may require additional documentation, such as:

- A copy of the separation agreement or divorce decree that shows the amount of child support to be provided;
- A statement from the individual receiving the child support certifying the amount of child support received; or
- Copies of the child support payment checks or money order receipts.

Student's Name:	C\	CWID		
Section 3 - Receipt of SNAP Be	enefits			
-		AN A		
In 2015 or 2016, did you or anyone in y benefits, previously called Food Stamp Yes		mental Nutrition Assistance Program (SNAP)		
□ No				
<ul> <li>1, 2018, through June 30, 2019</li> <li>Other people if they now live will continue to provide more</li> </ul>	n if you or your spouse will pr 9, even if the children do not li with you and you and your spo than half of their support throu	ouse provide more than half of their support and 13 June 30, 2019.		
<b>Note:</b> If we have reason to believe that the adocumentation from the agency that issued		of SNAP benefits is inaccurate, we may require 6.		
Section 4 – Signature(s) Requir	red			
Each person signing below certifies that all of the information reported is complete and correct.		WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.		
Print Student's Name	Campus Wide II	O (CWID)		
Student's Signature (Required)	Date			
Spouse's Signature (Optional)	Date			
Section 5 – Statement of Educa	ational Purpose			
<ul> <li>paperwork in to the financia</li> <li>In the presence of a Notary l in person.</li> </ul>	wed representative of the fina al aid office in person or Public if you are not submitt onal funds I receive to pay the	apleted and signed: ncial aid office if you submitting this ing this paperwork to the financial aid office costs associated with my attendance of the		
Student Signature	Date			
To be completed by Financial Aid Ad	dministrator if submitting in	person:		
Financial Aid Officer Name Printed Financial Aid Offi				
Financial Aid Officer Signature	Date			

Student's Name:	CWID	
To be completed by Notary Publi	ic if submitting by mail:	
State	County	
Notary Public Name Printed	Notary Public Name Signed	
Seal:		

Submit this completed and signed document to: Pepperdine University Attn: LAW Financial Aid 24255 Pacific Coast Hwy., Malibu, CA 90263