High School Completion Status

Student Name ________________________________   UIN ___________________________________

Provide one of the following documents that indicate the student’s high school completion status when the
student will begin college in 2016–2017:

 A copy of the student’s high school diploma.
 A copy of the student’s final official high school transcript that shows the date when the diploma was
  awarded.
 A copy of the student’s General Educational Development (GED) certificate or GED transcript.
 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.
 If State law requires a homeschooled student to obtain a secondary school completion credential for
  homeschool (other than a high school diploma or its recognized equivalent), a copy of that credential.
 If State law does not require a homeschooled student to obtain a secondary school completion credential
  for homeschool (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 documents the successful completion of 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.

Child Support Paid
(Independent Student)

One of the parents included in the household or the student paid child support in 2015. List below the names of
the persons who paid the child support, the names of the persons to whom the child support was paid, the
names of the children for whom the child support was paid, and the total annual amount of child support that
was paid in 2015 for each child.

If more space is needed, provide a separate page that includes the student’s name and ID number at the top.

<table>
<thead>
<tr>
<th>Name of Person Who Paid Child Support</th>
<th>Name of Person to Whom Child Support was Paid</th>
<th>Name and age of child for whom support was paid</th>
<th>Amount of Child Support Paid in 2015</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

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.
Receipt of SNAP Benefits
(Independent Student)

The parents certify that a member of the parents' household, received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as the Food Stamp Program) sometime during 2015. SNAP may be known by another name in some states. For assistance in determining the name used in a state, please call 1-800-4FED-AID (1-800-433-3243).

The parents' household includes:

- The student.
- The parents (including a stepparent) even if the student doesn't live with the parents.
- The parents' other children if the parents will provide more than half of their support from July 1, 2016, through June 30, 2017, or if the other children would be required to provide parental information if they were completing a FAFSA for 2015–2016. Include children who meet either of these standards even if the children do not live with the parents.
- Other people if they now live with the parents and the parents provide more than half of their support and will continue to provide more than half of their support through June 30, 2017.

Note: If we have reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, we may require documentation from the agency that issued the SNAP benefits in 2015.

☐ check this box to certify if one of the persons listed in my household received SNAP (food stamps in 2015).

☐ check this box to certify that no one in my household received SNAP (food stamps) in 2015.

Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

Print Student's Name                                      Student's ID Number
__________________________________________________________ ______________________________
Student's Signature                                      Date
__________________________________________________________ ______________________________
Signature                                                  Date

WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.
Identity and Statement of Educational Purpose  
(To Be Signed at the Institution)

The student must appear in person at Old Dominion University 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.

In addition, the student must sign, in the presence of the institutional official, the following Statement of Educational Purpose provided below.

Identity and Statement of Educational Purpose  
(To Be Signed With Notary)

If the student is unable to appear in person at Old Dominion University to verify his or her identity, the student must provide:

(a) A copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to a driver’s license, other state-issued ID, or passport; and

(b) The original notarized Statement of Educational Purpose provided below.

Statement of Educational Purpose

I certify that I, _____________________________ am the individual signing this Statement of Educational Purpose  
(Print Student’s Name)

and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Old Dominion University for 2015-2016.

_________________________________________  
(Student’s Signature)  
(Date)  
(Student’s UIN)

Notary’s Certificate of Acknowledgement

State of   City/County
of______________________________

On___________________, before me  
(Date)  
(Notary’s name)

personally appeared, __________________________________, and provided to me on basis of  
(Printed name of signer)

satisfactory evidence of identification

(Type of government-issued photo ID provided)

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

WITNESS my hand and official seal  
(Notary signature)

My commission expires on ______________________ (Date)

“Old Dominion University is an equal opportunity, affirmative action institution. Minorities, women, veterans and individuals with disabilities are strongly encouraged to apply.”