



Office of Financial Aid and Veteran Services  
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2022-2023  
**Verification Worksheet  
 V4 - Independent Student**

**Forms can be submitted by mail, fax (217/373-3807), or delivered in person.  
 To ensure your privacy, Do NOT submit forms through email.**

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Student's ID Number

**A. Illinois Residency Verification**

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The Illinois Student Assistance Commission (ISAC) requires independent students to verify Illinois residency.

“RESIDENTS OF ILLINOIS” is defined as: “An independent student who resides in Illinois (at the time of application), and has so resided for a period of twelve continuous months immediately prior to **September 1, 2021**.”

You must submit a copy of **one** of the acceptable documents listed below with a date of issuance between **September 1, 2020 and September 1, 2021**.

<p style="text-align: center;"><b>Acceptable Documents:</b></p> <ul style="list-style-type: none"> <li>▪ Illinois auto registration</li> <li>▪ Residential lease signed by you and your landlord</li> <li>▪ Illinois driver's license <b>or</b> Illinois State Issued ID</li> <li>▪ Utility or rent bills in your name</li> <li>▪ Statement of benefit history from Illinois Department of Public Aid</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> I have not lived in Illinois for one year</li> <li><input type="checkbox"/> I did live in Illinois during this period; however I am unable to provide supporting documentation. I understand that checking this box will render me ineligible to receive the Illinois MAP Grant.</li> </ul>
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**B. Identity and Statement of Educational Purpose**

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The student must appear in person at Parkland College 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 by the institution with the date it was received and reviewed 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 English or Spanish Statement:

**Statement of Educational Purpose**

I certify that I, \_\_\_\_\_, the individual signing this Statement of Educational 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 Parkland College for 2022-2023.

(Print Student Name)

\_\_\_\_\_  
(Student's Signature)

\_\_\_\_\_  
(Date)

**Declaración de Propósito Educativo**

Certifico que yo, \_\_\_\_\_, soy el individuo que firma esta Declaración de Finalidad Educativa y que la ayuda financiera federal estudiantil que yo pueda recibir, sólo será utilizada para fines educativos y para pagar el costo de asistir a Parkland College para 2022–2023.

[Imprimir Nombre del Estudiante]

\_\_\_\_\_  
[Firma del Estudiante]

\_\_\_\_\_  
[la Fecha]

If the student is unable to appear in person at Parkland College 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 (in English or Spanish) provided below.

**Notary's Certificate of Acknowledgement**

State of Illinois

City/County of \_\_\_\_\_

On \_\_\_\_\_ (Date), before me, \_\_\_\_\_ (Notary's name), personally appeared, \_\_\_\_\_ (Printed name of signer), and proved to me on basis of satisfactory evidence of identification \_\_\_\_\_ (Type of government-issued photo ID) to be the above-named person who signed the foregoing instrument.

**WITNESS my hand and official seal**

\_\_\_\_\_  
(Notary signature)

\_\_\_\_\_  
(Date)

## C. Certification and Signature

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

The person signing below certifies that all of the information reported on this worksheet is complete and correct.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

**Important: You must return all original worksheets to Parkland College.**

*Parkland College ensures equal educational opportunities are offered to all students regardless of race, color, national origin, gender, disability, sexual orientation, veteran/Vietnam veteran era, age, or religion, and is Section 504/ADA compliant. For additional information or accommodations call 217-351-2505.*