



**MID YEAR TRANSFER/FUNDS VERIFICATION
VERIFICATION AFFIDAVIT**

NAME: _____ **SSN#:** _____ - _____ - _____

ADDRESS: _____

HOME PHONE: (____) _____ - _____ **WORK PHONE:** (____) _____ - _____

SECTION I: To be completed by STUDENT.

➤ DID you attend any other college, university, technical, or proprietary school?

➔ **FALL** _____: **NO** **YES, list school(s)** _____

➔ **SPRING** _____: **NO** **YES, list school(s)** _____

➔ **SUMMER** _____: **NO** **YES, list school(s)** _____

➤ VERY IMPORTANT NOTE:

My financial aid may be delayed pending the verification of financial aid received or not received at the other school(s) I previously attended. I must be **PREPARED TO PAY MY OWN** tuition & books until verification of previous financial aid has been completed. I understand that if I receive funds (grant or loans) after giving false or misleading information, I will be required to pay back any funds that I am found to be ineligible.

● PLEASE INITIAL that you have read statements: _____
(initials)

CERTIFICATION OF AGREEMENT:

I _____, certify that I have not attended any
(please print name)
other college, university, technical, or proprietary school during the terms indicated above, nor did I receive financial aid during those periods. I understand that any false or misleading information I give on this document will result in a delay of my financial aid awards. I further understand that if I receive funds (grants or loans) after giving false or misleading information, I will be required to pay back any funds that I am found to be ineligible.

STUDENT'S SIGNATURE

____/____/____
DATE

ALLOW 2 - 4 WEEKS FOR PROCESSING.
CHECK THE RESULT OF YOUR FINANCIAL AID APPEAL ON www.accd.edu
YOU MUST BE PREPARED TO PAY YOUR OWN TUITION AND FEES PENDING A DECISION.