



## 2025-2026 NOTARIZED STATEMENT

### Section A: Student Information

Last Name

First Name

M.I.

Student ID Number (EMPLID)

Phone Number

Student Email Address

@email.vccs.edu

### Section B: Please complete the information below. \*Note: The Financial Aid Office reserves the right to request additional documentation, if needed.

**DO NOT SIGN THIS FORM UNTIL A NOTARY IS PRESENT.** By signing this statement, I (we) certify that all the information reported is complete and correct. I (we) further understand that purposely giving false or misleading information regarding eligibility for federal aid may result in fines, jail terms or both.

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Parent Signature**

(Dependent students only)

\_\_\_\_\_  
**Date**

State of Virginia; County of Chesterfield, to wit: the foregoing statement was acknowledged before me this \_\_\_\_\_ day  
of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_.

My Commission expires \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
**Notary Public**