

2016-2017: V4-VERIFICATION

LAST NAME	FIRST NAME	FIRST NAME ANDREWS UNIVERSITY ID NUMBER TELEPHONE/MOBILE	
LAST 4 DIGITS OF SOCIAL SECURITY NUMBER	ER ANDREWS U		
STUDENT'S EMAIL ADDRESS	TELEPHONE,		
> Did you or anyone in your household If you answered yes, list children living or	pay child support in 2015? utside of the household for whom child suppor	□ Yes □ No	
CHILD #1	CHILD #2	CHILD #3	
Child's name	Child's name	Child's name	
Child's age	Child's age	Child's age	
Amount paid \$	Amount paid \$	Amount paid \$	
Paid to	Paid to	Paid to	
Payor name	Payor name	Payor name	
Payor signature	Payor signature	Payor signature	
> Verification of high school completio ☐ I have received a diploma from I have completed a GED. ☐ I have completed a home sch	nool program.	nh school or academy).	
Student signature		Date	

Many questions regarding financial aid can be answered by visiting our SFS website at www.andrews.edu/sf

Fax to: 269.471.3228

Phone: 269.471.3334

Web: www.andrews.edu/sf
Email: sfs@andrews.edu

Mail to: Andrews University

Office of Student Financial Services 4150 Administration Drive Berrien Springs, MI 49104-0750