FORM VETACT - IDAHO STATE UNIVERSITY 25-26 VETERAN/ACTIVE DUTY FORM	VETACT-26
The federal government requires colleges to check the accuracy of the information you provided on your Free Application for Federal Student Aid (<u>FAFSA</u>). This process is called verification. Students are required to complete the verification process before the Office of Financial Aid can establish eligibility for assistance. You must provide the information requested on this form or you will not be considered for federal financial aid. Please return this completed form with applicable attachments to:	
Office of Financial Aid, Idaho State University, Museum Building, Third Floor 921 S 8 th Ave, Stop 8077, Pocatello, ID 83209-8077 Phone: (208)282-2756 Fax: (208)282-4755 Email: <u>financialaid@isu.edu</u> Scan and Upload: <u>isu.edu/financialaid/upload</u>	

*Student Name:			
(Use blue or black ink)	Last	First	M.I.
*ISU ID:		*Last 4 Digits of Social Security #:	
(Find on <u>MyISU</u>)			*Required

The Veterans Administration did not confirm your status as a veteran or serving active duty in the Armed Forces. To qualify as such for Financial Aid consideration you must:

- (1) have engaged in or currently serving active duty in the U.S. Armed Forces (Army, Navy, Air Force, Marines, or Coast Guard) or have been called to active duty for purposes other than training as a National Guard or Reserves enlistee or as a cadet or midshipman at one of the service academies, and
- (2) have been released under a condition other than dishonorable.

To confirm your veteran status, please attach a copy of your DD214 Member 4 or Service 2 to this form and return to the address above. If you are on active duty, please attach a copy of your current orders or a letter from your commanding officer.

CERTIFICATION: The person signing below certifies that all of the information reported is complete and correct.

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

Student Signature:_

Typed signatures not accepted

Date:

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