

2019-2020 Form N

Bachelor's Degree Statement

Your 2019-2020 FAFSA was selected for review in a process called "Verification." In this process, the financial aid office will compare the information reported on your FAFSA with the information on this form and any other required documentation. The law states that we have the right to ask for confirmation of this information before awarding federal student aid. You and a parent (if applicable) whose information was reported on the FAFSA must sign this form, attach any required documentation, and submit the completed package to the LCC Financial Aid Office. If there are differences between the information reported on your FAFSA and the documents submitted to our office, we will make the necessary corrections. We retain the right to request additional information as needed to complete your file. If you have any questions about the verification process, contact the Financial Aid Office as soon as possible to avoid a delay in processing your request for financial aid.

****Your eligibility for financial aid cannot be determined until the verification process is complete****

Student Name: _____ LCC ID#/Last Four of SSN#: _____

Address: _____ City: _____ State: _____ Zip: _____

You indicated on your Free Application for Federal Student Aid (FAFSA) that **you have** a bachelor's degree and/or you are working on a degree **beyond** a bachelor's degree (Master's or Doctorate program).

Please indicate whether or not you have a bachelor's degree or are currently working on a degree beyond a bachelor's degree by checking below:

- I **do not have** a bachelor's degree, nor am I working on a degree beyond a bachelor's degree.
- I **do have** a bachelor's degree.
- I am currently working on a degree **beyond** a bachelor's (Master's or Doctorate).

Certification:

I certify that the submitted information is true and correct to the best of my knowledge and belief. If asked by an authorized official, I agree to provide additional proof of the information provided on this form.

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

Student Signature: _____ Date: _____

MAIL OR FAX THE COMPLETED FORM AND SUPPORTING DOCUMENTATION TO:
Lenoir Community College • Office of Financial Aid
P.O. Box 188 • Kinston, NC 28502
Fax: 252-233-6896 • Email: Finaid@lenoircc.edu