

2025-2026 Identity Verification Form (V4)

A. Student Information

Student Name:	7-digit NAU ID Number:
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Your 2025-2026 FAFSA was selected for Verification. Learn more at: nau.edu/verification.

- Instructions:**
1. To verify your identity, you must meet with an NAU official in person or a notary public.
 - a. Online notary services and foreign notary services are unacceptable. If you are located outside of the U.S., please contact our office at 928-523-4951.
 2. Complete the correct sections of this form:
 - a. If meeting with an NAU official, complete sections **A** and **B** together.
 - b. If you are unable to meet with an NAU official, complete the form **in the presence of a notary public** and complete sections **A** and **C** instead.
 3. Bring proper ID:
 - a. You must present an **unexpired, government-issued photo ID** (e.g., driver's license, state issued identification (ID), or passport).
 4. Submission Method:
 - a. If notarized, this form **cannot be submitted electronically or by fax**. The original copy must be mailed or submitted in person at our office.
- Note:** Incomplete forms will not be accepted and will delay your financial aid processing.

B. Identity Verification *(to be signed at the Institution)*

The student **must appear in person with a NAU official** to verify their identity by presenting an unexpired valid government-issued photo ID. If the student **is unable to meet with a university official** to verify their identity, they must present their unexpired government-issued photo identification to a Notary Public to verify their identity and complete this form.

I will complete this form by presenting my unexpired valid government-issued photo ID in person at Northern Arizona University.

Full name as it appears on your photo ID	Date of birth
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University Official's Certification:

The student is appearing In Person

Verified name and date of birth match

Verified ID photo matches the individual

Scanned copy of student's photo ID with my name and today's date

Printed name of university official: _____

Signature: _____

Department: _____

Date: _____

