

LAMAR STATE COLLEGE – PORT ARTHUR FINANCIAL AID

NOTARIZED VERIFICATION OF SEPARATION

Student's Name: _____ LSCPA Student ID Number: _____

I, _____, _____ verify that _____
Verifying Person Relationship to Student Person Separated

and _____ have been separated since _____.
Person Separated Month Year

Signature of Verifying Person

Printed Name of Verifying Person

STATE OF _____ COUNTY OF _____

BEFORE ME, on this day personally appeared _____ known to be the person
(Name of Verifying Person)
whose name is subscribed to the foregoing instrument and acknowledged to me that this person executed the same for the purpose and consideration therein expressed.

GIVEN under my hand and official seal this the _____ day of _____, _____.
(Month) (Year)

(Seal)

Signature of Notary Public

*Note: The verifying person can not be the "Persons Separated" nor immediate family and the Notary Public can not be family.