

**LAMAR STATE COLLEGE – PORT ARTHUR FINANCIAL AID**  
**EMPLOYMENT NOTARIZED VERIFICATION OF NON-OWNERSHIP**

Student's Name: \_\_\_\_\_ LSCPA ID Number: \_\_\_\_\_

To Whom It May Concern:

I, \_\_\_\_\_, do hereby certify that Mr./Mrs.  
*(Verifying Person/Owner of Co. or Vessel)*

\_\_\_\_\_ (is employed by me) (was employed by me) and is not the  
*(Employee)* *(Please circle one)*

owner of the following Company/Vessel \_\_\_\_\_.

Employee's Address: \_\_\_\_\_  
Address City State Zip

Employer's Address: \_\_\_\_\_  
Address City State Zip

\_\_\_\_\_  
*(Signature of Verifying Person /Owner of Co. or Vessel)*

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

BEFORE ME, on this day personally appeared \_\_\_\_\_ known to  
*(Name of Verifying Person)*

be the 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 owner of the company is the one that should sign this form in front of a notary public and the notary public cannot be family.