

Date Received:______Received by:_____

2020-2021 VERIFICATION OF IDENTITY/STATEMENT OF EDUCATIONAL PURPOSE (To be signed at the Institution)

Student Name (print)	Student ID#/SSN
verify his or her identity by presenting valid to, a driver's license, other state-issued ID,	to lame of Postsecondary Educational Institution) d government-issued photo identification (ID), such as, but not limited , or passport. The institution will maintain a copy of the student's was received and the name of the official at the institution authorized
	resence of the institutional official, the following:
I certify that I(Print Student's Name) Statement of Educational Purpose I may receive will only be used for e	am the individual signing this and that the federal student financial assistance educational purposes and to pay the cost of attending for 2020-2021.
(Student's Signature) (Student's ID Number)	(Date)