McLennan Community College 2020-2021 Verification Identity / Statement of Educational Purposes

Instructions to complete this form

Students must complete sections A, B, and C and have the option on sections D and E as follows:

- Section D (may be completed by your campus official) print this form, take proof of identity to your campus and have the campus complete section D; or
- Section E (if you are unable to get to the campus for completion of section D) print this form, take proof of identity to a Notary and have the notary complete section E. **Note**: Student must provide the school with this original signed <u>and</u> notarized form.

Once you have satisfied sections A, B, C and selected section D, you must have your Financial Aid Officer scan or fax into your electronic file. If you selected section E, see "**Note**" above.

A. Student's Information (please print)					
Student's Last Name	Student's First Name	Student's M.I.	Student's SSN (Last 4-digits)		
Student's Street Address (in	nclude apt. no.)	Student's Email Address			
City	State	Zip Code	-		
Student's Home Phone Nur	mber (include area code)	Student's Alternate or Cell Phone Number			

B. Identity / Statement of Educational Purposes

A student must appear in person and present the following documentation to an institutionally authorized individual to verify the student's identity. If a student is unable to appear in person (ex: Online student), he or she must provide a <u>copy</u> of the following documents:

- A valid government-issued photo identification, such as but not limited to:
 - Driver's license;
 - > State issued identification (Non-drivers license);
 - Passport

	Student's Name:	SSN (Last 4-digits):			
C.	Statement of Educational Purpose				
	I certify that I	am the individual signing this Statement of			
	(Student's Printed Name) Educational Purpose and that the federal student financial assistance I may receive will only be used for				
	educational purposes and to pay the cost of attending				
	for 2020-2021.	(Name of Postsecondary Educational Institution)			
	10f 2020-2021.				
	Student's Signature	Date			
	Student's ID Number				
D.	(School Use) Verification and Signature				
	My signature below certifies that I am an authorized representative of this school and that I have personally reviewed the state of the school and that I have personally reviewed the school and the school				
	identification document(s) submitted by the student Note : A copy of the student's valid government is:	sued ID(s) has been made and placed in the student's file.			
	Date identification documents were presented by the student and reviewed by me:				
	Authorized School Official's Printed Name	Title			
	Signature	Date			
E.	Notary's Certificate of Acknowledgement				
	State of				
	City/County of				
	On, before me	2,			
	(Date)	(Notary's Name), and proved to me on basis of			
	(Student's Prin	ted Name) to be the			
	above-named person who signed the foregoing in	(Type of government-issued photo ID provided)			
	WITNESS my hand and official seal				
	(seal)	(Notary Signature)			
		My commission expires on			