

**Identity and Statement of Educational Purpose
Verification
2019-2020**

Identity and Statement of Educational Purpose
(To Be Signed at Clatsop Community College)

You must appear in person at Clatsop Community College or to verify your identity by presenting a valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. This institution will maintain a copy of your photo ID that is annotated with the date it was received and the name of the Financial Aid Officer at the institution authorized to collect the student's ID.

In addition, you must sign, in the presence of the institutional official, the following:

Statement of Educational Purpose

I certify that I _____ am the individual signing this
(Print Student's Name)

Statement of 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 2019-2020.

(Name of Postsecondary Education Institution)

(Student's Signature)

(Date)

(Student's ID Number)

Bring this form and a valid government-issued photo identification (ID) to:
Clatsop Community College, Columbia Hall, Room 116 / Financial Aid Office
1651 Lexington Ave., Astoria, OR 97103

If you cannot appear in person, please use the following page, which must be completed and signed in the presence of a Notary (who must also review your valid government-issued photo identification (ID)).

Financial Aid Officer Certification:

Government Issued Photo ID: _____
Type/Number

Signature: _____ Date: _____

Identity and Statement of Educational Purpose To Be Signed With Notary

If you are unable to appear in person at Clatsop Community College to verify your identity, you must provide:

- (a) A copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to a driver's license, other state-issued ID, or passport; and
- (b) The original notarized Statement of Educational Purpose provided below.

Statement of Educational Purpose

I certify that I _____ am the individual signing this
(Print Student's Name)

Statement of 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 2019-2020.

(Name of Postsecondary Education Institution)

(Student's Signature)

(Date)

(Student's ID Number)

Notary's Certificate of Acknowledgement

State of _____

City/County of _____

On _____, before me, _____

(Date)

(Notary's name)

Personally appeared, _____, and provided to me

(Printed name of signer)

on basis of satisfactory evidence of identification _____

(Type of government-issued photo ID provider)

To be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

(seal)

(Notary signature)

My commission expires on _____
(Date)

Submit documentation to:

Clatsop Community College, Columbia Hall, Room 116 / Financial Aid Office
1651 Lexington Ave., Astoria, OR 97103 / 503.338-2322 / finaid@Clatsopcc.edu / www.clatsopcc.edu