

**To Be Signed at the Institution**

The student must appear in person at \_\_\_\_\_ to verify his or her identity by presenting an  
(Print School Name)  
unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

**To Be Signed in the Presence of a Notary (if you cannot appear in person)**

If the student is unable to appear in person at \_\_\_\_\_ to verify his or her identity, the student must provide to the institution:  
(Print School Name)

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, other state- issued ID, or passport; and
- (b) The original Statement of Educational Purpose provided below, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

**Statement of Educational Purpose**

I certify that I \_\_\_\_\_ am the individual signing this Statement of  
(Print Student's 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 2018-2019.  
(Print School Name)

\_\_\_\_\_  
(Student's Signature) (Student ID) (Date)

**Notary's Certificate of Acknowledgement (may vary by State)**

State of \_\_\_\_\_ City/County of \_\_\_\_\_

On \_\_\_\_\_ (Date), before me, \_\_\_\_\_ (Notary Name),

personally appeared, \_\_\_\_\_ (Printed name of signer), and proved to me on the basis

of satisfactory evidence of identification \_\_\_\_\_  
(Type of unexpired government-issued photo ID provided) to be the

above-named person who signed the foregoing instrument.

WITNESS my hand and official seal \_\_\_\_\_ (Notary signature) (Seal)

My commission expires on \_\_\_\_\_ (Date)

**WARNING: Purposely providing false or misleading information can result in fines, imprisonment, or both.**

For School Use Only: Received by \_\_\_\_\_ Date \_\_\_\_\_

**Return ORIGINAL FORM with documentation to:**  
WNCC Financial Aid Office • 1601 E. 27<sup>th</sup> Street • Scottsbluff, NE 69361  
(308) 635-6011 • fax (308) 635-6732 • Secure filedrop: <https://docsafe.wncc.edu/filedrop/FINAID>