Financial Aid Offices

Lancaster, Salkehatchie, Sumter, Union

2023-24 IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

Student's Name:	VIP ID:
• •	nt Aid (FAFSA) was selected for review in a process called I, we are required to verify your identity and collect a signed
To Be Sig	gned at the Institution
dentity by presenting an unexpired valid governr a driver's license, other state-issued ID, or passpo	to verify his or her e of Postsecondary Educational Institution) ment-issued photo identification (ID), such as, but not limited to, ort. The institution will maintain a copy of the student's photo ID it was received and reviewed, and the name of the official at the student's ID.
n addition, the student must sign, in the presence Purpose provided below.	ce of the institutional official, the Statement of Educational
Statement	t of Educational Purpose
	am the individual signing this s Name) ederal student financial assistance I may receive will only be used
or educational purposes and to pay the cost of a	ttending
For 2023-24.	(Name of Postsecondary Educational Institution)
Student's Signature:	Date:

To Be Signed in the Presence of a Notary

The student must appear in pe	rson at to verify his or he (Name of Postsecondary Educational Institution)	er
Identity, the applicant must pr		
, , , ,	I valid government-issued photo identification (ID) that is acknowledged in the v, or that is presented to a notary, such as, but not limited to, a driver's license, r passport; and	
statement appears on a	of Educational Purpose provided below, which must be notarized. If the notary a separate page than the Statement of Educational Purpose, there must be a clear ement of Educational Purpose was the document notarized.	
	Statement of Educational Purpose	
I certify that I	am the individual signing this	
Statement of Educational Purp	(Print Student's Name) ose and that the Federal student financial assistance I may receive will only be use	ed
for educational purposes and t	o pay the cost of attending(Name of Postsecondary Educational Institution)	
for 2023-24.	(Name of Postsecondary Educational Institution)	
Student's Signature:	Date:	
Student's Signature: Student's ID Number:		
Student's ID Number:		
Student's ID Number:	Notary's Certificate of Acknowledgement	
Student's ID Number: State of City/County of	Notary's Certificate of Acknowledgement	
Student's ID Number: State of City/County of On (Date)	Notary's Certificate of Acknowledgement _, before me,	
State of City/County of On (Date) personally appeared,	Notary's Certificate of Acknowledgement _, before me,	
State of City/County of On(Date) personally appeared, on basis of satisfactory evidence	Notary's Certificate of Acknowledgement _, before me,	
State of City/County of On(Date) personally appeared, on basis of satisfactory evidence	Notary's Certificate of Acknowledgement , before me,	

My commission expires on _

(Date)