

## 2022-2023 IDENTITY and STATEMENT OF EDUCATIONAL PURPOSE

## To Be Signed at the Institution

The student must appear in person at <u>Western Nebraska Community College</u> to verify his or her identity by presenting an 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 <u>Western Nebraska Community College</u> to verify his or her identity, the student must provide to the institution:

- (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 Educational		
I certify that I(Print Student's Name)			
Purpose and that the Federal student financial assist	tance I may receive will only be used for education	ational purposes and to pay	
the cost of attending Western Nebraska Comr	nunity College for 2022-2023.		
(Student's Signature)	(Student's ID Number)	(Date)	
Notary's Certificate	of Acknowledgement (may vary by Sta	ate)	
State of	City/County of(Notary's Name),		
On(Date), before me,		(Notary's Name),	
personally appeared,	(Printed name of signer), and proved to me on the basis of		
satisfactory evidence of identification(Type or		to be the	
		ded)	
above-named person who signed the foregoing instr			
WITNESS my hand and official seal		(Notary signature)	
My commission expires on	(Date)	(SEAL)	
<u>WARNING</u> : Purposely providing false	or misleading information can result in fines,	imprisonment, or both.	
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For School Use Only: Received by	Da	Date	
Type of Document:	(valid governmen	(valid government-issued photo ID provided)	

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