

Identity and Statement of Educational Purpose Verification 2024 - 2025

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

	oment of Laudaniena Farbore
	am the individual signing this
(Print Student's Name)	
will only be used for educational pe	and that the federal student financial assistance I may receive urposes and to pay the cost of attending for 2024 - 2025.
(Name of Postsecondary Education Institu	
(Student's Signature)	(Date)
(Student's ID Number)	_
Clatsop Cor	ralid government-issued photo identification (ID) to: mmunity College/ First Stop, Columbia Hall 51 Lexington Ave., Astoria, OR 97103
, , , , , , , , , , , , , , , , , , , ,	ease use the following page, which much be completed and (who must also review your valid government-issued
Financial Aid Officer Certification:	
Government Issued Photo ID:	Type/Number
	туре/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(Print Student's Name)		am the individual signing this Statement of	
used for educational pu	nd that the federal student fi urposes and to pay the cost for 2024		be
(Name of Postsecondary Ed	ducation Institution)		
(Student's Signature)		(Date)	
(Student's ID Number)			
	Notary's Certificate of	_	
State of			
UIIV/UOIIIIV OI			
On	, before me,		
(Date)	(Notary's name	e) , and provided to me	
Personally appeared, _		, and provided to me	
(Printed name of signer) evidence of identification		
To be the above-name	Type) d person who signed the fore	of government-issued photo ID provider) egoing instrument.	
WITNESS my hand and of (seal)	fficial seal		
,		tary signature)	
My commission expires on _	(Date)		

Submit documentation to:

Clatsop Community College | First Stop | Columbia Hall | Room 109 1651 Lexington Ave., Astoria, OR 97103 | finaid@Clatsopcc.edu | www.clatsopcc.edu

Clatsop Community College is an affirmative action, equal opportunity institution. ADA accessible. For the complete Non-Discrimination and Accommodations statements, please visit https://www.clatsopcc.edu/ada

Clatsop Community College es una institución de igualdad de oportunidades y de discriminación positiva. Para las declaraciones completas de No-discriminación y de Ayuda a las personas discapacitadas, visite https://www.clatsopcc.edu/ada