
2018-2019 Identity and Statement of Educational Purpose

Name _____ / _____
SSN _____ Student ID# _____

You must verify your identity and sign a Statement of Educational Purpose. You may complete this in person using the front of this form or you may complete this in the presence of a notary using the back of this form.

**Identity and Statement of Educational Purpose
(To Be Signed at the Institution)**

The student must appear in person at **Orangeburg Calhoun Technical College** to verify his or her identity by
(Name of Postsecondary Educational Institution)
presenting a 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 with the date it was received and the name of the official at the institution authorized to collect the student's ID.

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

Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement of Educational
(Print Student's Name)
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 **Orangeburg-Calhoun Technical College** for 2018-2019.
(Name of Postsecondary Educational Institution)

(Student's Signature)

(Date)

Financial Aid Comments ~ Do Not Write Below this Line:

- | | |
|--|---|
| <input type="checkbox"/> Verification completed in person, no issues found. | <input type="checkbox"/> Verification attempted, issues found with HS completion. |
| <input type="checkbox"/> Verification completed remotely, no issues found. | <input type="checkbox"/> No response from applicant or unable to locate. |
| <input type="checkbox"/> Verification attempted, issues found with identity. | |
| <input type="checkbox"/> Copy of government-issued ID received (not expired) | |

If signed in person, authorized institutional official has made a copy of government-issued ID received, and signed and dated the copy.

Signature: _____ Date: _____
(Institutional Official)

(over)

Return this form and any attachments to the above address.

