

2023-24

Identity and Statement of Educational Purpose

(V4, V5)

WARNING: <u>If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.</u> <u>** MAIL OR HAND DELIVER COMPLETED ORIGINAL FORM AND A COPY OF A VALID ID **</u>

STUDENT INFORMATION

Last Name	First Name	M.I.	Allen ID Number	
Address (include apartment number)			Social Security Number	
City	State	Zip	Phone number (include area code)	

IDENTITY

The student must appear in person and sign in front of a notary officer at <u>Allen Community College or a Notary</u> <u>Officer off campus</u> to verify his or her 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.

STATEMENT of EDUCATIONAL PURPOSE

I certify that I			am the individual signing
	Print Student's Nar	ne)	
this Statement of Educational Purpose and that	the Federal Stud	lent Financ	cial Assistance I may receive will only
be used for educational purposes and to pay the	cost of attendin	ig <u>Allen Co</u>	ommunity College for 2023-2024.
Student Signature	Date		Allen ID Number
This fo	orm <u>must</u> be No	otarized.	
Subscribed and sworn before me this day of		, 20	in (City)
(County),	(State)	My Commis	sion expires:
(SEAL)			
		Notary Public Signature	
Official high school transcript must be in a sea	led envelope and	d mailed or	hand delivered to Admissions office.

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