

My commission expires on (Date) _____

2022-2023 Verification Worksheet



Identity and Statement of Educational Purpose

You, the student must appear in person at East Central College to verify your 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. East Central College will maintain a copy of your photo ID that is annotated with the date it was received & reviewed & the name of the official at the institution authorized to collect your ID. In addition, you must sign, in the presence of the institutional official, the following Statement of Educational Purpose.

ALITHODIZED COLLEGE CERTOLAL		
AUTHORIZED COLLEGE OFFICIAL:	STUDENT:	
Topy student unexpired, valid government-issued photo ID AT THE TIME of their signing the Statement & annotate hat copy with your name and the date verifying student dentity. You may place it below & make a copy:	Statement of Education	·
AUTHORIZED OFFICIAL NAME DATE	(print Student' am the individual signing this <i>Statement of Educational Purpose</i> and that the Federal stud financial assistance I may receive will only be u for educational purposes and to pay the cost or attending East Central College for 2022-23.	lent ised
INSTRUCTIONS TO AUTHORIZED COLLEGE OFFICIAL: Place ID here and copy BEFORE student signs	 (Student's Signature)	
	(Date)	
If you're unable to be present at East Central		gement (below)
you, the student, are unable to appear in person at East Central Collega. A copy of the unexpired, valid government-issued photo identification or that is presented to a notary, such as but not limited to, a driver's on the original Statement of Educational Purpose provided above, will separate page than the Statement of Educational Purpose, there musurpose was the document notarized.	tion (ID) that is acknowledged in the notary statemer license, other state-issued ID, or passport; and nich must be notarized. If the notary statement appears	ears on
THIS STATEMENT & COPY OF ID MUST BE SUBM	ITTED TO EAST CENTRAL COLLEGE IN ORIG	INAL PAPER FORM
state of City/County of	On (date)b	oefore me,
Notary's name), personally a	ppeared,(signer)	, and
proved to me on basis of satisfactory evidence of identifica	tion (type of ID)	
o be the above-named person who signed the foregoing i	nstrument.	
WITNESS my hand	d and official seal	
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SUBMIT FORM TO: Financial Aid Office | finaid@eastcentral.edu | fax 636-583-6651 | call 636-584-6588 | 1964 Prairie Dell Road, Union, MO 63084



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LAST NAME	FIRST NAME	STUDENT ID#	BIRTHDATE	SOC. SEC. #	PHONE #		
Submit to the Financial Aid Office in-person, at your campus, or via email, fax, or mailing address listed at the bottom of this page within 30 days after							
notification. If more space is neeeded for any line item on this form, provide a separate page that includes the student's name and ID # at the top.							
Certification & Signature							
EACH PERSON SIGNING CERTIFIES	x		x				
THAT ALL OF THE INFORMATION	STUDENT SIGNATURE	DATE	PARENT SIGNATURE (if a dep. student) DATE				
REPORTED IS COMPLETE & CORRECT	Warning: If you purposely give false or misleading information, you may be fined, sentenced to jail, or both.						