

2023–2024 Identity/Statement of Educational Purpose Verification Worksheet

Your application was selected for review in a process called verification. In this process, we are required by federal law to compare the information from your FAFSA application with the information provided on this form. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the Financial Aid Office. We cannot process your financial aid until verification has been completed.

Complete this form and return it to: CC Financial Aid Office, 600 Centralia College Blvd., Centralia, WA, 98531-4099

Phone: 360.623.8975 Email: ccfinancialaid@centralia.edu

Student Information	tion
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Last Name	First Name	M.I.	Social Security Number
Mailing Address			ctcLink ID
City	State	Zip Code	Date of Birth (mm/dd/yyyy format)
Email Address			Phone Number

Identity Verification & Statement of Educational Purpose

I am appearing in person at Centralia College with my unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The Financial Aid Office is required to maintain a date stamped and initialed copy of my ID with my financial aid file.

I am unable to appear in person at Centralia College, therefore I am attaching a notarized copy of my unexpired valid government-issued photo identification (ID), such as, but not limited to, my driver's license, other state-issued ID, or passport.

Statement of Educational Purpose

I am appearing in person to sign the statement below (must be signed in presence of Financial Aid staff and contain a wet signature).

I am unable to appear in person, therefore I am submitting the notarized statement of educational purpose. Centralia College does not reimburse for any fees associated in the notarizing process.

Student's Name:	ctcL	ink ID:
Statement of Educational Purpose - c	ontinued	
Otatomont of Educational Fulpoco o		
I certify that I(Print Name)	am the individual	signing this Statement of
Educational Purpose and that the Fede for educational purposes and to pay the		
(Student's Signature)	(ctcLink ID)	(Date)
Notary use only		
State of		
City/County of		
On, before me, (Date)	(Notary's	name)
personally appeared,(Printe	ed name of signer)	, and proved to me
	- ·	
because of satisfactory evidence of identifi	(Type of unexpired governm	nent-issued photo ID provided)
to be the above-name person who signed the	ne foregoing instrument.	
WITNESS my hand and official seal (seal)		
My commission expires on		Notary signature)
, 1	(Date)	

FA Staff use only:

ID provided

Issues w/identity?

Notary used?

Staff Initials:_____ Date:_

nt's Name:		ctcLink ID:
cation and Signature		
I certify that all of the informati		
Warning: if you nurnosely give	e false or misleading infor	rmation you may be fined, be sentenced to iail, or both.
Warning: if you purposely give	e false or misleading infor	rmation you may be fined, be sentenced to jail, or both.
Warning: if you purposely give	e false or misleading infor	rmation you may be fined, be sentenced to jail, or both.
Warning: if you purposely give	e false or misleading infor	rmation you may be fined, be sentenced to jail, or both.
Warning: if you purposely give Student Signature	e false or misleading infor	Parent Signature (required for dependent) Date

Why we need your Social Security number: Disclosure of your social security number is mandatory to apply for federal student aid, under Section 484(a)(4)(B) of the Higher Education Act of 1965, as amended. The college uses your social security number to match your records with the Free Application for Federal Student Aid, to identify you and to process payments.