

## Identity and Statement of Educational Purpose 2021 - 2022

Student's Last Name	Student's First Name	MI	El Camino Student ID Number
Student's Email Address	Student's Phone	Number	Student's Date of Birth
This Statement of Educational Purp	ose is <u>ONLY</u> to be completed	in person at	the Institution or in front of a Notary.
	Identity and Statement o	f Education	Purpose
(Complete this section and th			below if signing in person at the Institution)
The student must appear in person at	(NI	- f D t	and any Education In effection
driver's license, other state-issued ID,	ing an unexpired valid governm or passport. The institution will d and reviewed and the name o	nent-issued p maintain a co f the official a	ndary Education Institution)  hoto identification (ID), such as, but not limited to, a ppy of the student's photo ID that is annotated by the at the institution authorized to receive and review the
(Complete this section and the Statem	Identity and Statement of pent of Educational Purpose pro-		I Purpose f signing in the presence of a Notary <i>only</i> if unable to
Toompiete time section and the statem	sign in person at t		
If the student is unable to appear in pe	erson at		
in the ctadent is unable to appear in pe	(Na	ame of Posts	econdary Education Institution)
to verify his or her identity, the student			
or that is presented to a notal (b) The original Statement of Ed	ry, such as, but not limited to, a ucational Purpose provided belo ement of Educational Purpose, t	driver's licens ow, which mu	that is acknowledged in the notary statement below, se, other state-issued ID, or passport; and st be notarized. If the notary statement appears on a e a clear indication that the Statement of Educational
In addition, the student must sign, i provided below.	n the presence of the instituti	onal official	or notary the Statement of Educational Purpose
	Statement of Educ	cational Purp	oose
I certify that I		m the individ	ual signing this Statement of Educational Purpose
`	udent's Name)		
and that the Federal student financial	assistance I may receive will on	ly be used fo	r educational purposes and to pay the cost of
attending			for 2021-2022.
	(Name of Postsecondary Educ	ational Institu	ition)
(Student's Signature	) (Dat	e)	(Student's ID Number)
(Financial Aid Admin	istrator's Signature)		Date
	Notary's Certificate o	f Acknowled	gement
State of	City/County of		On
before me,	personally appea	ared.	
(Notary's Nan	ne) personally appea	<u>-</u>	(Printed name of signer)
and proved to me on basis of satisfactor	ory evidence of identification		
To be the above-named person who si	gned the foregoing instrument.	(Тур	e of government-issued photo ID provided)
WITNESS my hand and official seal			
	(Notary Signa	ture)	(Date Commission Expires)
(Soal)			
(Seal)			