

2020-2021 Verification Worksheet (V5)

Identity and Statement of Educational Purpose

(To Be Signed at the Institution)

The student must appear in person at _

to verify your identity by

(Name of Postsecondary Educational Institution) presenting an unexpired valid **Government-issued photo identification (ID)**, such as, but not limited to, a driver's license, other stateissued ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated by the institution with the date it was received and reviewed, the name of the official at the institution authorized to receive and review the student's ID. In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

Identity and Statement of Educational Purpose (To Be Signed in the Presence of a Notary)

If the student is *unable* to appear in person at _

(Name of Postsecondary Educational Institution) to verify his or her identity, the student must provide to the institution both of the following:

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, other state-issued ID, or passport; and
- (b) The original Statement of Educational Purpose provided below, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

	Statement of Educational Purpose	al cigning this Statement of Educational Durness and	
(Print Student's full legal	ann the individua	al signing this Statement of Educational Purpose and	
		cational purposes and to pay the cost of attending	
(Name of Postsecondary Educational Institu	tion)		
(Student's Signature)	(Date)	(Student's ID Number)	
student sig	pear in person, the Identity & Stateme nature must be witnessed (in person) b ry's Certificate of Acknow	y a Notary Public.**	
State of	City/County of		
On	, before me,	, personally appeared,	
	, before me,, personally appeared,, notary's name)		
(Printed name of signer)	, and provided to me on a basis o	t satisfactory evidence of identification	
	To the above-named perso	n who signed the foregoing instrument.	
(Type of government-issued photo ID prov			
WITNESS my hand and official seal (Notary Seal)	(Notary Signat	sure)	
	My commissic	My commission expires on	
		(Date)	
	 Mailing address: Dakota Co 105 Simrall B Phone: 1-800-542 	opped off at the address listed ollege at Bottineau • Financial Aid Office lvd • Bottineau, ND 58318 -6866 Ext 469 or (701) 228-5469 : jalee.lynnes@dakotacollege.edu	