

Fletcher Technical Community College 1407 Highway 311 985.448.7900 main 985.448.7998 fax www.fletcher.edu

2023-2024 IDENTITY & STATEMENT OF EDUCATIONAL PURPOSE

tudent Name.	ib Numberi releptione number
Mailing Address:	Email Address
A. IN PERSON	
identification (ID), such as, but not limited student's photo ID that is annotated with	College Financial Aid Office to verify his or her identity by presenting a valid government-issued photo to, a driver's license, other state-issued ID, or passport. The institution will maintain a copy of the the date it was received and the name of the official at the institution authorized to collect the st sign, in the presence of the institutional official, the following:
PROOF OF HIGH SCHOOL COMPLETION: (Staff use only - Check which applies)
☐ Copy of GED	transcript that shows the date when the diploma was awarded
	Statement of Educational Purpose am the individual signing this Statement of Educational Purpose and that nay receive will only be used for educational purposes and to pay the cost of attending Fletcher Technical year.
(Student's Signature)	(Date)
(Staff Witness Initials)	(Date)
B. BY MAIL (Originals required, f	ax not acceptable)
Signed With Notary)	
State of	
City/County of	me (Notary's name),
personally appeared (Printed name of sign	ner),
	y evidence of identification (Type of government-issued photo ID provided) to be the above-named person who signed the foregoing instrument.
WITNESS my hand and official seal (seal)	
V/	(Notary signature)
My commission expires on (Date)	