



Fletcher Technical Community College
 1407 Highway 311
 Schriever, LA 70395
 985.448.7900 main
 985.448.7998 fax
www.fletcher.edu

2018-2019 IDENTITY & STATEMENT OF EDUCATIONAL PURPOSE

Student Name: _____ ID Number: _____ Telephone Number: _____

Mailing Address: _____ Email Address: _____

A. IN PERSON

The student must appear in person at the Fletcher Financial Aid Office to verify his or her identity by presenting a valid government-issued photo identification (ID), such as, but not limited to, a driver’s license, other state-issued ID, or passport. **The institution will maintain a copy of the student’s photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect the student’s ID.** In addition, the student must sign, in the presence of the institutional official, the following:

PROOF OF HIGH SCHOOL COMPLETION: (Staff use only - Check which applies)

- Proof of high school equivalency
- Copy of final official high school transcript that shows the date when the diploma was awarded
- Copy of GED

Copy of document received. Date received: _____ Accepted by: _____

Statement of Educational Purpose

I certify that I (Print Student’s Name) _____ am the individual signing this Statement of Educational Purpose and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending the college for the current aid year.

 (Student’s Signature) (Date)

 (Staff Witness Initials) (Date)

B. BY MAIL (Originals required, fax not acceptable)

If the student is unable to appear in person at **College Financial Aid Office** to verify his or her identity, the student must provide both: **(To Be Signed With Notary)**

- (a) A copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to a driver’s license, other state-issued ID, or passport; and
- (b) The original notarized Statement of Educational Purpose provided below.

Notary’s Certificate of Acknowledgement

State of _____
 City/County of _____
 On (Date) _____, before me (Notary’s name), _____
 personally appeared (Printed name of signer), _____,
 and provided to me on basis of satisfactory 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)

 (Notary signature)

My commission expires on (Date) _____