

| Student Information | |
|---------------------|-----------------|
| Name: | Student Number: |
| Email: | Cell Phone: |

**Identity and Statement of Educational Purpose
(To Be Signed at the Institution)**

The student must appear in person at Southern Union State Community College to verify his or her identity by presenting an unexpired 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 by the institution with the date it was received and reviewed, and 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.

Statement of Educational Purpose

I certify that I, _____, am the individual signing this
(Print Student's Name)

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 Southern Union State Community College for **2023-2024**.

Student's Signature

Date

Student's ID Number

| FAO use only | |
|--------------------------------------|--|
| Reviewed by _____ | |
| Copy of ID attached _____ | |
| Originals Located at _____ Campus | |