



Identity Verification and Statement of Educational Purpose

Student's name _____ FGC ID # _____

The student must appear in person at **Florida Gateway College** to verify his or her identity by presenting 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:

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
Florida Gateway College for _____.
(Aid Year)

(Student's Signature)

(Date)

FGC Office of Financial Aid use only:

Date received: _____

I have reviewed the valid government-issued photo id for the student listed above and a copy is attached to this form.

Name of official who reviewed identification _____



**Identity and Statement of Educational Purpose
(To Be Signed With Notary)**

If the student is unable to appear in person at **Florida Gateway College** to verify his or her identity, the student must provide:

- (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.

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

Florida Gateway College for _____.

(Aid Year)

(Student's Signature)

(Date)

Notary's Certificate of Acknowledgement

State of _____

City/County of _____

On _____, before me, _____,

(Date)

(Notary's name)

personally appeared, _____, and provided to me

(Printed name of signer)

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)

*Submit this form to:
Florida Gateway College
Office of Financial Aid
149 SE College Place
Lake City, FL 32025
386-754-4296*

You should make a copy of this worksheet for your records.