

## 2016-2017 Verification Identity and Statement of Educational Purpose

\*Stop! Do not sign this form unless you are in the Financial Aid Office or in the presence of a Notary Public\*

Statement of Educational Purpose		
I certify that I am the individual signing this Statement of Educational Purpose (Print Student's Name)		
and that the federal student financial assistance I m		
pay the cost of attending <u>Ozarka College</u> for	· · · · · · · · · · · · · · · · · · ·	ational pulposes and to
pay the cost of attending <u>Ozarka conege</u> for	2010 2017.	
	<u> </u>	
(Student's Signature)	(Student's ID Number)	(Date)
(Financial Aid Staff Member's Signature)	Aid Staff Member's Signature) (Date)	
( marcar la stan menser s signature)		
*You must provide valid government-issued photo identification, such as driver's license, other state issued ID, or etc.*		
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	cate of Acknowledgement ege Financial Aid Staff member is not present)	
State of		
City/County of		
On, before me, (Date) personally appeared,(Printed name of signer) on basis of satisfactory evidence of identifications		
(Date)		
personally appeared,	, and pr	ovided to me
(Printed name of signer)		
on basis of satisfactory evidence of identificat	(Type of government issued photo ID	provided)
to be the above-named person who signed th		provided)
F		
WITNESS my hand and official seal		
(seal)	(Notary signature)  My commission expires on	