



PO Box 17202
Trenton, NJ 08690
Federal School Code: 002641

Office Hours
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2015-2016 IDENTITY & EDUCATIONAL PURPOSE STATEMENT

INSTRUCTIONS

Either:

The student must appear in person at MCCC to verify his or her identity by presenting valid government-issued photo identification (ID), such as, but not limited to, a driver's license, or other state- issued ID, or passport. MCCC 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 MCCC authorized to collect the student's ID.

OR

If the student is unable to appear in person at MCCC to verify his or her identity, the student must provide:

1. 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**
2. The original notarized **Statement of Education Purpose** provided below.

A. Student Information

_____	_____	_____	_____	_____
<i>Last Name</i>	<i>First name</i>	<i>M.I.</i>	<i>Social Security Number</i>	<i>Colleague ID</i>
_____			_____	
<i>Address (include apt. no.)</i>			<i>Date of birth</i>	
_____	_____	_____	_____	
<i>City</i>	<i>State</i>	<i>Zip Code</i>	<i>Phone number (include area code)</i>	

B. 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 MCCC for 2015 – 2016.

(Student's Signature) (Date)

Notary's Certificate of Acknowledgement

(only needed if not able to appear in person at MCCC)

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)

FOR OFFICE USE ONLY: Attach photocopy of ID after verifying identity

Document Used: _____ Date Received: _____ Authorized Name: _____