



Financial Aid Office  
PO Box 421  
Glendive, MT 59330  
Phone: (406) 377-9410  
Fax: (406) 377-8132

### 2018-2019 Identity Verification & Statement of Educational Purpose

Name: \_\_\_\_\_ DCC ID#: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone# \_\_\_\_\_

You have been selected for a process called "Verification". In this process, we are required to verify your identity. If unable to appear in person at Dawson Community College's Financial Aid Office, you must verify your identity by appearing in person and presenting a federally approved form of photo identification (examples are listed below) to a Notary Public. A copy of the form of photo identification must be submitted to the Financial Aid Office.

- A valid government issued photo identification, such as but not limited to a driver's license, other state-issued ID, military identification or passport.

**Note:** Only an original notarized statement is considered satisfactory for verifying identity. All faxed, emailed or copied versions of this form will be rejected. Aid cannot be disbursed until the requested documentation is received and reviewed by the Financial Aid Office.

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  
Dawson Community College for 2018-2019.

Student 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 on basis of  
(Printed name of signer)

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)