

Last Name

Financial Aid Office 1555 S Raisinville Rd Monroe, MI 48161 Tel: (734) 384-4135

Student ID#

2022-2023: IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE (TO BE SIGNED AT THE INSTITUTION)

First Name

Address (include apt. #)	City	 State	 Zip Code
Address (melade apt. #)	City	State	Zip code
Phone Number	E-mail Addre	SS	Date of Birth
The student must appear in per presenting an unexpired valid go driver's license, other state-issued ID that is annotated by the institution at the institution authorized to recopresence of the institutional official	vernment-issued photo ID, or passport. The ins on with the date it was eive and review the stu	identification (ID), su titution will maintain a received and reviewed dent's ID. In addition,	ich as, but not limited to, a copy of the student's photo , and the name of the official the student must sign, in the
	Statement of Educat	ional Purpose	
I certify that I		am the individual	signing this
·	ent's Name)		
Statement of Educational Purpos			•
only be used for educational purp	ooses and to pay the co	st of attending Monro	e County Community
College for 2022-2023.			
Student's Signature			Date
I verified the applicant's identity	in person.		
MCCC Authorized Individual (Pri	nt)		Date
MCCC Authorized Individual (Sig	nature)		Date

Your record was selected for Identity and Statement of Educational Purpose verification by the Federal government. You must bring the following (original) documentation so the Financial Aid staff can make a copy.

Source Documentation	RECEIVED / MADE COPY	STAFF INITIALS
An unexpired valid government-issued photo identification  (e.g. driver's license, state identification card, military identification or passport).	□ Yes	

I certify that the information reported on this form is true and additional documentation to the Financial Aid Office.	correct. If requested, I agree to provide
Student's Signature	Date
I verified the applicant's identity in person and received the above	e information directly from the applicant.
MCCC Authorized Individual (Print)	Date
MCCC Authorized Individual (Signature)	Date