



25/26 IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

VERIFY YOUR IDENTITY AND SIGN A STATEMENT OF EDUCATIONAL PURPOSE

Last Name

First Name

M.I.

Student ID

Email address

COMPLETE THIS SECTION IF YOU ARE ABLE TO VISIT OUR OFFICE IN PERSON

The student must appear in person at the Danville Area Community College Financial Aid Office to verify the student's identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport (see page 2 for instructions if you cannot visit our office in person). The institution will maintain a copy of the ID that is annotated by our institution with the date it was received and reviewed, and the name of the official at our institution authorized to receive and review the student's ID.

In addition, the student must sign, in the presence of a DACC Financial Aid official, the Statement of Educational Purpose provided below.

STATEMENT OF EDUCATIONAL PURPOSE

I certify that I _____

(Print Student's Name)

am the individual signing this 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 Danville Area Community College for **2025-2026**.

Student signature

Date

OFFICE USE ONLY

(Date, Stamp, & Initial)

ONLY COMPLETE THIS SECTION IF YOU ARE UNABLE TO VISIT OUR OFFICE IN PERSON

IF COMPLETED WITH A NOTARY, THIS ORIGINAL DOCUMENT MUST BE MAILED TO THE DACC FINANCIAL AID OFFICE AT THE ADDRESS ABOVE.

If the student is unable to appear in person at Danville Area Community College to verify the student's identity, the student must provide to the institution:

- **A copy of an unexpired valid government-issued photo identification**, such as, but not limited to, a driver's license, non-driver's identification card, other State-issued identification, or U.S. passport that is acknowledged in a notary statement or that is presented to a notary; AND
- The original Statement of Educational Purpose provided below, which must be notarized.

STATEMENT OF EDUCATIONAL PURPOSE

I certify that I _____

(Print Student's Name)

am the individual signing this 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 Danville Area Community College for **2025-2026**.

Student signature

Date

NOTARY CERTIFICATE OF ACKNOWLEDGEMENT

(Notary signature/seal required if the student is not providing information in person. Notaries can often be found at local banks, credit unions, insurance agencies, or shipping stores. Certification may vary by state)

State of: _____ City/County of: _____

On _____, before me, _____
Date Notary's name

Personally appeared, _____ and proved to me
Printed name of signer

on the basis of satisfactory evidence of identification _____
Type of unexpired government-issued photo ID provided

To be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

Notary signature

My commission expires on _____

Date

(SEAL)