



Identity and Statement of Educational Purpose

(To Be Signed at the Institution)

STUDENT NAME: _____
LAST FIRST

STUDENT NUMBER: _____

The student must appear in person at **George C. Wallace Community College** to verify his or her 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. The institution will maintain a copy of the student's photo ID that is annotated by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

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 **George C. Wallace Community College**.

(Student's Signature)

(Date)

(Student's ID Number)

You may submit this form in person at the Financial Aid office or one of the other submission options below:

Dothan Campus

Mail: 1141 Wallace Drive
Dothan, AL 36303
Email: finaid@wallace.edu
Fax: 334-556-2523

Eufaula Campus

Mail: P.O. Drawer 580
Eufaula, AL 36072
Email: finaid@wallace.edu
Fax: 334-687-3128

FINANCIAL AID OFFICE USE ONLY:

DATE FORM AND ID RECEIVED AND REVIEWED: _____

RECEIVED BY: _____