

FOR OFFICE USE ONLY

Date

FAA signature

OFFICE OF FINANCIAL AID financialaid@edgecombe.edu

Tarboro Campus: 2009 W. Wilson Street Tarboro, NC 27886 T: 252.823.5166 F: 252.824-3990 Rocky Mount Campus: 225 Tarboro Street Rocky Mount, NC 27801 T: 252.823.5166

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STUDENT NAME:	STUDENT ID:
	ntity and Statement of Educational Purpose (To Be Signed at the Institution)
The student must appear in person a an unexpired valid government-issue other state-issued ID, or passport. The	It Edgecombe Community College to verify his or her identity by presenting ed photo identification (ID), such as, but not limited to, a driver's license, he institution will maintain a copy of the student's photo ID that is annotated s received and reviewed, and the name of the official at the institution
Purpose provided below.	the presence of the institutional official, the Statement of Educational
S	tatement of Educational Purpose
I certify that I	am the individual signing this
(Pri	nt Student Name)
	Purpose and that the federal student financial assistance I may receive rational purposes and to pay the cost of attending Edgecombe 022-2023.
(Student's Signature)	(Date)
(Student's ID Number)	

Student Name:	ECC ID#

2022-23 Identity and Statement of Educational Purpose (Must be notarized and mailed to the Financial Aid Office at Edgecombe Community College)

If you are unable to appear in person at Edgecombe Community College to verify your identity, you 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 Educational Purpose provided below.

Statement of	Educational	Purpose
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	Statement of Educational Purpose	
I certify that I	am the individual signing this	
Statement of Educational P	Student Name) urpose and that the federal student financial assistance I may sonal purposes and to pay the cost of attending Edgecombe 2-2023.	receive
(Student's Signature)	(Date)	
(Student's ID Number)		
	Notary's Certificate of Acknowledgement	
State of		
City/County of		
On	, before me,	
(Date)	(Notary's Printed Name)	
personally appeared,	, and provided me (Printed name of signer)	
	(Printed name of signer)	
on basis of satisfactory evider	ce 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)