Richland Community College policy prohibits discrimination on the basis of race, color, religion, sex, marital or parental status, national origin or ancestry, age, mental and/or physical disabilities (except where they are bona fide occupational qualifications), sexual orientation, gender identity, military or veteran status, or other legally protected characteristics or conduct.

The student must appear in person at Richland 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. Richland 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.

If the student is unable to appear in person at Richland Community College to verify his or her identity, the student must provide:

a. A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, other state-issued ID, or passport; and

b. The ORIGINAL Statement of Educational Purpose provided below, which must be notarized. If the notary statement appears on a separate page, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

The Statement of Educational Purpose below must be signed in the presence of a Financial Aid staff member or Notary.

**Statement of Educational Purpose**

I certify that I __________________________________ am the individual signing this Statement of Educational Purpose (Print Student's name)

and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending ______________________________________________________________ for 2020-2021. (Name of Postsecondary Educational Institution)

_________________________  __________________________________  __________________________________
(Student's Signature)  (Student's ID#)  (Date)

**Notary’s Certificate of Acknowledgment**

State of __________________ City/County of __________________ on __________________, before __________________, before

me, ____________________________________________, personally appeared, ____________________________________________,

(Notary’s Name)  (Printed Name of Signer)

and proved to me on basis of satisfactory evidence of identification __________________

(Type of unexpired valid 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)

OFFICE USE ONLY

☐ Student presented in office, Notary not necessary.

Statement Received By: __________________ Date: __________________

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R.3.2020