

2023-2024 VERIFICATION OF IDENTITY/STATEMENT OF EDUCATIONAL PURPOSE (To be signed with Notary)

Student Name (print)		College ID
If the student is unable to a to verify his or h	opear in person at Great ner identity, the student m	
(a) copy of the valid government-issued photo such as, but not limited to, a dri		
(b) The original notarized Si	tatement of Educational F	Purpose provided below.
Stateme	nt of Educational Pur	rpose
I certify that I(Print St	am udent's Name)	n the individual signing this
Statement of Educational Purp	ose and that the federal s	student financial assistance
I may receive will only be used for Great Bay C	r educational purposes ar community College for 20	
(Student's	Signature)	(Date)
State of, before r		
(Date)	(Not	otary's name)
personally appeared,(F	,	, and provided to me
(F	Printed name of signer)	
on basis of satisfactory evidence of ide		
	(Type of g	government issued ID provided)
Government Issued ID Number		
to be the above-named	person who signed the fo	oregoing instrument.
WITNES	S my hand and officia	al seal
(seal)		
	(Notary signature)	
My commission ex	pires on	
·	(Da	ate)
320 Corpora	nunity College – Office of ate Drive – Portsmouth N gbFinAid@ccsnh.edu	
Email - Phone (603) 427-7600 – Fax (60	03) 334-6308