



2024-2025 Identity and Statement of Educational Purpose

Serving Richmond and Scotland Counties

To Be Signed With Not	ary				
Student Name: Last	First	Student ID:			
Last	First	MI			
Address: P O Box or Street		City		tate Zi _I	p
Telephone:	Email:	Date o	of Birth:		
If the student is unable to apper provide to the institution: (a) A copy of the unexpired valistatement below, or that is possible issued ID, or passport; and (b) The original Statement of Edistatement appears on a separatement appears on a separatement of the statement.	d government-issued photo resented to a notary, such a ducational Purpose provided arate page than the Stateme	identification (ID) the s, but not limited to below, which musters of Educational P	nat is acknowle , a driver's lice t be notarized. Purpose, there	edged in the ense, other si	notary tate-
	Statement of Educat	-			
Certify that I,(Print Student's]	Name)			·	(1
and that the Federal student finar cost of attending Richmond Comr		will only be used for e	educational purp	ooses and to p	pay tne
Student Signature		Date			
	Notary's Certificate of A	Acknowledgemen	t		
State of	County of		on _		
before me,	perso	onally appeared,			
Notary's Na			Printed name of s	igner)	
And provided to me on basis		of identification of government-issued pho	oto ID provided)		
To be the above-named person who signed		oz government issued pik	WITNESS my h	and and official seal)	seal
Notary Signature		Date			