



**OFFICE OF FINANCIAL AID AND VETERANS AFFAIRS**

1011 PAGE ST. • TROY, NC 27371 • (910) 898-9600 • FAX: (910) 576-2176  
Federal School Code – 008087 • <https://www.montgomery.edu/financial-aid>

**2024-25 Identity and Statement of Educational Purpose**  
**(To Be Signed With Notary)**

If the student is unable to appear in person at \_\_\_\_\_ Montgomery Community College \_\_\_\_\_  
**(Name of Postsecondary Educational Institution)**

to verify his or her identity, the student must provide to the institution:

- (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 than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

**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 2024-25.  
**(Name of Postsecondary Educational Institution)**

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

Certifications and Signatures Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

\_\_\_\_\_  
**(Student’s Signature)**

\_\_\_\_\_  
**(Parent’s Signature if needed)**

\_\_\_\_\_  
**(Student’s ID Number)**

\_\_\_\_\_  
**(Date)**

Notary’s Certificate of Acknowledgement (Notary’s certification may vary by State)

State of \_\_\_\_\_  
City/County of \_\_\_\_\_

On \_\_\_\_\_, before me, \_\_\_\_\_,  
**(Date) (Notary’s name)**

personally appeared, \_\_\_\_\_, and proved to me  
**(Printed name of signer)**

on the basis of satisfactory evidence of identification \_\_\_\_\_  
**(Type of unexpired 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)**

***We recommend you make a copy of this worksheet for your records. Submit this completed worksheet immediately to the MCC Office of Financial Aid and Veterans Affairs***