Cape Fear Community College

2025-2026 Identity and Statement of Educational Purpose (To Be Signed at the Institution)

The student must appear in person at **Cape Fear Community College** to verify his or her identity by:

- (a) 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. The institution 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 collect the student's ID.
- (b) In addition, the student must sign, in the presence of the institutional official, the following Statement:

Statement of Educational Purpose

I certify that I	am the individual signing this
(Print Student's Name	2)
Statement of Educational Purpose and that the	e Federal student financial assistance I may
receive will only be used for educational purp	poses and to pay the cost of attending
Cape Fear Community College for 2025-20	
(Student's Signature)	(Date)
(CECC ID #)	
(CFCC ID #)	
(Social Security #)	

Cape Fear Community College

2025-2026 Identity and Statement of Educational Purpose (To Be Signed In the Presence of a Notary, if remote)

If the student is unable to appear in person at <u>Cape Fear Community College</u> 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, such as, but not limited to a driver's license, other state-issued ID, or passport; and
- (b) The original notarized Statement of Educational Purpose provided below.

Statement of Educational Purp	ose
--------------------------------------	-----

I certify that I	am the individual signing this Statement of
(Print Studer	
	ral Student Financial Assistance I may receive will only be used
	r the cost of attending Cape Fear Community College for
2025-2026.	ç
(Student's signature)	(Date)
(CFCC ID #)	
(eree in ")	
(Social Security #)	
Notary's	Certificate of Acknowledgement
	y's certification may vary by State
State of	
City/County of	
On, before n	ne,,
(Date)	(Notary's name)
personally appeared,	, and proved to me ded name of signer)
On basis of satisfactory evidence of ide	ed name of signer)
On basis of satisfactory evidence of ide	(Type of government-issued photo ID provided)
To be the above-named person who sign	
To be the doore named person who sig	, not the foregoing more ment.
WITNESS my hand and official seal	
(Seal)	
(Notary signature)	
My commission expires on	
Tilly commission expires on	(Date)