

# 2020-2021 Identity Verification and Statement of Educational Purpose

## Financial Aid Office

1933 Fort Vancouver Way | Vancouver, WA 98663-3598

Empl ID Number	-	-	Nat'l ID Number	-	-
Last Name			First Name	Middle Initial	

Your 2020-2021 Free Application for Federal Student Aid (FAFSA) was selected by the Department of Education for review. To complete the review, you must complete and submit this Verification form and additional documents required. The Clark College Financial Aid Office will compare your FAFSA with the information provided. Clark College will correct and resubmit your FAFSA to the Department of Education if discrepancies are found as a result of the review. If additional information is needed to complete the review, Clark College will contact you via email.

If you are UNABLE to SUBMIT THIS FORM IN PERSON, you must:

- **Notarize** this form
- **Mail** the original notarized form with a copy of valid government-issued photo identification to the Clark College Financial Aid Office at the following address:

Clark College Financial Aid/GHL 101  
1933 Fort Vancouver Way  
Vancouver, WA 98663

I certify that I, \_\_\_\_\_ (Print Student's Name) am the individual signing this Statement of Educational Purpose and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending \_\_\_\_\_ (Name of Postsecondary Educational institution) for 2020-2021.

### Notary Use Only

SUBSCRIBED AND SWORN before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

I certify that I know or have satisfactory evidence that (name of person) \_\_\_\_\_ is the person who appeared before me, and said person acknowledged that (he/she) signed the 2020-2021 Identity Verification and Statement of Educational Purpose and acknowledged it to be (his/her) free and voluntary act for the use and purpose mentioned in this instrument.

Seal

Notary Public in and for State of \_\_\_\_\_ (signed)

Notary Public in and for State of \_\_\_\_\_ (print)

My Commission expiration date \_\_\_\_\_

**STUDENT CERTIFICATION AND SIGNATURE:** By signing and submitting this form, I certify that all information reported on it is true and correct. I understand that by purposely giving false or misleading information on this form, I may be fined, sentenced to jail, or both.

**Student's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Date Stamp

Tracking Code **ID** \*\*add RQ\*\*  
Checklist **FCL083**

Clark College does not discriminate on the basis of race, color, national origin, age, perceived or actual physical or mental disability, pregnancy, genetic information, sex, sexual orientation, gender identity, marital status, creed, religion, honorably discharged veteran or military status, or use of a trained guide dog or service animal in its programs and activities, in accordance with state and federal laws. The responsibility for and the protection of this commitment extends to students, faculty, administration, staff, contractors and those who develop or participate in college programs. It encompasses every aspect of employment and every student and community activity. The following person has been designated to handle inquiries regarding non-discrimination policies: Vice President of Diversity, Equity, and Inclusion, Gaiser Hall (GHL) 220, 360-992-2757, or 360-991-0901 (video phone).

