

**2020–2021 Identity and Statement of Educational Purpose  
(To Be Signed in the Presence of a Notary)**

**Mail this original form AND a copy of the ID that is acknowledged in this statement to:** Indian Hills Community College,  
Attn: Financial Aid, 525 Grandview Avenue, Ottumwa, Iowa 52501. **This form cannot be faxed or emailed.**

Student's Name \_\_\_\_\_ Student's ID Number \_\_\_\_\_

If the student is unable to appear in person at \_\_\_\_\_  
(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  
(Print Student's Name)

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 \_\_\_\_\_ for 2020–2021.

(Name of Postsecondary Educational Institution)

\_\_\_\_\_  
(Student's Signature) (Date)

\_\_\_\_\_  
(Student's ID Number)

**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)