

**GREENVILLE TECHNICAL COLLEGE
2019-2020**

IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

As part of the verification process, you must verify your identity by: (1) *appearing in person* at the Greenville Technical College Financial Aid Office and 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 and (2) **signing, in the presence of a GTC financial aid official**, the Statement of Educational Purpose form below.

If you are NOT able to appear in person, provide (1) a **legible, clear copy of a valid government-issued photo identification** (ID), such as, but not limited to, a driver's license, state-issued ID, or passport AND (2) **mail the original, notarized Statement of Educational Purpose** provided below. We cannot accept a copy of this statement.

Mail to:
Greenville Technical College
Financial Aid Office (MS 6033)
PO Box 5616, Greenville, SC 29606-5616

Bring to:
ARC, Financial Aid Office (McAlister Square)
225 South Pleasantburg Drive
Phone: 864-250-8000

STATEMENT OF EDUCATIONAL PURPOSE

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 Greenville Technical College for 2019-2020.

Student ID Number _____	Student's Signature _____	Date _____
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NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT

State of _____

City/County of _____

On (Date) _____, before me, (Notary's name) _____,

personally appeared, (Printed name of signer) _____, and provided

to me on basis of satisfactory evidence of identification (Type of government-issued photo ID provided)

_____ to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal Notary signature
(seal) _____

My commission expires on (Date) _____

CERTIFICATION AND SIGNATURE

Each person signing below certifies that all of the information reported is complete and correct.

Print Student's Name _____

Student's ID Number _____

Student's Signature _____ Date _____
(Required)

Parent's Signature _____ Date _____
(if dependent student)

FA Official Signature / Title _____ Date _____

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