



2020-21 Identity and Statement of Educational Purpose  
(To be signed at the institution)

Financial Aid Office: Building B, Room 232

Student's Legal Name \_\_\_\_\_

Student ID Number \_\_\_\_\_ Phone \_\_\_\_\_

**IDENTITY**

**Identity and Statement of Educational Purpose (To be signed at the institution)**

The student must appear in person at Morton College to verify his or her identity by presenting a 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 with the date it was received and the name of the official at the institution authorized to collect the student's ID.**

In addition, the student must sign, in the presence of the institutional official, the following:

**STATEMENT OF EDUCATIONAL PURPOSE**

I certify that I, \_\_\_\_\_, am the individual signing this Statement of  
*Print Student's Name*

Educational Purpose and that the federal student aid I may receive will only be used for educational purposes and to pay the cost of attending Morton College for 2020-2021.

**Federal Warning:** Any person who knowingly makes a false statement or misrepresentation on all forms submitted shall be subject to a fine up to \$10,000 or imprisonment of up to five years or both under provisions of the U.S. Code.

I declare under penalty of perjury that all information reported on this form and all the information reported on the 2020-2021 Free Application for Federal Student Aid which will be used to qualify for state and federal student aid is true, complete and accurate.

*I certify that I have read and understand all items on this form and all information provided for my financial aid is true and correct.*

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

**IDENTIFICATION PROOF**

Name and signature of authorized Morton College staff who received and reviewed the student's ID on the noted date.  
**(Attach copy of documentation to this form)**

\_\_\_\_\_  
*(Print Authorized Morton College Staff Name)*

\_\_\_\_\_  
*(Authorized Morton College Staff Signature)*

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