



Financial Aid Office  
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 6<sup>th</sup> Floor  
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 EmilyGriffith.edu

## 2024-2025 Identity and Statement of Educational Purpose

Student Name (Print): \_\_\_\_\_ Student ID#: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Your 2024–2025 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. According to the Department of Education, before offering Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this form and with any other required documents. If there are differences, your FAFSA information will be corrected.

### **Identity and Statement of Educational Purpose** – (MUST be signed in person at Emily Griffith Technical College)

The student must appear in person at Emily Griffith Technical College to verify his or her identity by 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.

In addition, the student must sign, in the presence of an Emily Griffith Technical College staff member, the following:

### **Statement of Educational Purpose**

I certify that I \_\_\_\_\_ am the individual signing this  
 (Print Student Name)

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 **Emily Griffith Technical College** for 2024-2025.

\_\_\_\_\_  
 Student Signature

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

\_\_\_\_\_  
 Date

Copy of student's unexpired valid government-issued photo identification obtained by Emily Griffith Technical College Staff Member.

\_\_\_\_\_  
 Emily Griffith Technical College Staff Member Signature

\_\_\_\_\_  
 Date

Student Name (Print): \_\_\_\_\_ Student ID#: \_\_\_\_\_

If the student is unable to appear in person at **Emily Griffith Technical College** 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 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, which is provided below, 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 this  
(Print Student Name)

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 **Emily Griffith Technical College** for 2024-2025.

\_\_\_\_\_  
Student Signature

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

\_\_\_\_\_  
Date

**Notary’s Certificate of Acknowledgement**

State of \_\_\_\_\_ City/County of \_\_\_\_\_

On \_\_\_\_\_, before me, \_\_\_\_\_  
(Date) (Notary Name)

personally appeared, \_\_\_\_\_, and proved to me  
(Print Student Name)

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**  
(Seal)

\_\_\_\_\_  
(Notary Signature)

My commission expires on \_\_\_\_\_  
(Date)

**By signing this form, I certify that all the information reported on this form is complete, true, and accurate. I understand that purposely providing false or misleading information could result in criminal prosecution, prison sentence, and/or a fine pursuant to U.S. Criminal Code and Colorado Criminal Code. I affirm that I have read, understand, and agree to this form in its entirety.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date