

IDENTITY VERIFICATION FOR ONLINE ONLY STUDENTS 2023-2024

(To be signed at the Institution)

D# A	Name			
	(LastName)	(First	tName)	(MI)
1. Identity and Statement of Educa	tional Purpose			
If the student is unable to appear in pe	erson at St. Louis Community Colle	ege to verify his or her iden	tity, the student must prov	vide:
a. A copy of the valid government-i limited to, a driver's license, other	ssued photo identification (ID) that er state-issued ID or passport, and	is acknowledged in the no	tary statement below, suc	ch as, but not
b. The original notarized Statement	of Educational Purpose (in English	or Spanish) provided below	W.	
2. Statement of Educational Purpo	se			
•	, am the individual signing this Statement of Educational			
Purpose and that the federal student financia	al assistance I may receive will only be	used for educational purposes a	and to pay the cost of attendi	ng St.
Louis Community College for 2023-2024	4.			
Student Signature		Date	Student ID Number	
	OFFICE USE	ONLY		
(Type of ID	copied)	(FA Initials)	_	
			Date Rec'd.	Ву