

ID # **A**

Name _____
(Last Name) (First Name) (MI)

Identity Verification (Online Only Students)

STLCC has selected you for identity verification.

To meet this requirement, you must complete this form and provide a clear legible copy of a present a valid, unexpired government-issued photo ID, such as a U.S. passport, driver’s license, or other state-issued identification.

You can submit this form in person at the Enrollment Services Office near you. If you are unable to appear in person you may submit the signed form (no pictures will be accepted) along with a clear legible copy of your current ID as listed above to enrollmentservices@stlcc.edu.

Please note: Your financial aid application cannot move forward until this form, and the required identification has been received and verified.

By signing this form, I attest that the identification I have provided is valid, current, and belongs to me. I certify that the information presented is true and accurate to the best of my knowledge.

Student Signature

Student ID Number

Date

OFFICE USE ONLY

(Type of ID copied)

(ESC Initials)

Date Rec’d. _____ By _____