Forms can be submitted by mail, fax (217/373-3807), or delivered in person. To ensure your privacy, Do NOT submit forms through email.

<table>
<thead>
<tr>
<th>Name</th>
<th>Student’s ID Number</th>
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**A. Identity and Statement of Educational Purpose**

The student **must appear in person** at Parkland College to verify their identity by presenting a valid, unexpired, 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 the institutional official**, the following statement:

**Statement of Educational Purpose**

I certify that I, _____________________________, 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 Parkland College for 2024-2025.

_____________________________________________          ________________
(Student’s Signature)                               (Date)

If the student is unable to appear in person at Parkland College to verify their identity, the student must provide:
(a) A copy of the valid, unexpired, government-issued photo identification (ID) that is acknowledged in the notary statement below, such as, but not limited to, a driver’s license, other state-issued ID, or passport; and
(b) The original notarized Statement of Educational Purpose provided below.
Notary’s Certificate of Acknowledgement

State of Illinois
City/County of ____________________

On__________ (Date), before me, ____________________________ (Notary’s name), personally appeared, ____________________________ (Printed name of signer), and proved to me on basis of satisfactory evidence of identification_________________________ (Type of government-issued photo ID) to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

__________________     __________
(Notary signature)            (Date)

B. Certification and Signature

Each person signing certifies that all of the information reported on this worksheet is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

__________________________  __________________________
Student’s Signature            Date

Important: You must return all original worksheets to Parkland College.

Parkland College ensures equal educational opportunities are offered to all students regardless of race, color, national origin, gender, disability, sexual orientation, veteran/Vietnam veteran era, age, or religion, and is Section 504/ADA compliant. For additional information or accommodations call 217-351-2505.

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