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437 Pequot Avenue New London, CT 06320 Phone: 800-443-2811

**2019-2020 Custom Verification Worksheet**

***INSTRUCTIONS:***

* *The student must appear in person at the Financial Aid Office, Mitchell College to complete section 1****.***
* *If the student cannot appear in person at Mitchell College at the time of this request, SKIP Section 1 and complete Section 2 before a Notary.*

**Section 1: IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE- (*to be signed at Mitchell College*)**

1. **The student must appear in person at Mitchell 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.

Mitchell College will maintain a copy of the student’s photo ID that is annotated with the date it was received and reviewed and the name of the official at Mitchell College authorized to collect the student’s ID.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Mitchell College Official (Print Name) Date**

1. **In addition, the student must sign, in the presence of the Mitchell College official, the Statement of Educational Purpose provided below.**

**Statement of Educational Purpose**

I certify that I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ am the individual signing this *Statementof* (**Print Student’s Name)**

*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 Mitchell College for 2019-2020.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student’s Signature Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student ID**

**Section 2: IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE- (to be signed with a Notary)**

1. **If the student is unable to appear in person at Mitchell College to verify his or her identity, the student must provide to Mitchell College:**
2. 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**
3. The **original** Statement of Educational Purpose, which is provided below, **must be notarized**.

**Statement of Educational Purpose**

1. **In addition, the student must sign, in the presence of a Notary the following:**

I certify that I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ am the individual signing this *Statement***(Print Student’s Name)**

*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 Mitchell College for 2019-2020.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student’s Signature Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student ID**

**Notary’s Certificate of Acknowledgement**

State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City/County of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

On\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, before me, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **(Date)** **(Notary’s Name)**

personally appeared, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and proved to me on basis of

 **(Printed name of the signer)**

satisfactory evidence of identification \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to be the above-

 **(Type of government-issued photo ID provided)**

named person who signed the foregoing instrument**.**

**WITNESS my hand and official seal** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **(Seal)  (Notary Signature)**

My commission expires on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **(Date)**