

Financial Aid 141 College Drive, Albemarle, NC 28001 **Tel:** (704) 991-0302 financialaid@stanly.edu

Form 6N

IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE (To Be Signed in the Presence of a Notary)

| Student ID# | |
|--|--|
| If the student is unable to appear in per | (Name of Postsecondary Educational Institution) |
| verify his or her identity, the student mus | |
| ``, I' | vernment-issued photo identification (ID) that is acknowledged in at is presented to the notary, such as, but not limited to, a driver's passport; and |
| (b) The original Statement of Education | ional Purpose provided below, which must be notarized. |
| Staten | nent of Educational Purpose |
| | am the individual signing this Statement of student financial assistance I may receive will only be used for of attending |
| | for 2024-2025 |
| (Name of Postsecondary Educational Institut | ion) |
| (Student's Signature) | (Date) |
| (Student's ID Number) Notary's (| Certificate of Acknowledgement |
| State of | |
| City/County of | |
| (Date) | (Notary's Name) |
| personally appeared,(Printed name of sig | , and provided to me on |
| basis of satisfactory evidence of identifica | · |
| to be the above-name person who signed | (Type of government-issued photo ID provided) |
| WITNESS my hand and official seal | |
| (seal) | |
| ` ' | (Notary Signature) |
| My commission expires on | |
| (Date) | |

WARNING: If you purposely give false or misleading information, you may be fined, sentenced to prison, or both.