

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 <b>unable to appear in perso</b>	on attototototo
• • •	(Name of Postsecondary Educational Institution)
verify his or her identity, the student must p	provide to the institution:
	rnment-issued photo identification (ID) that is acknowledged in is presented to the notary, such as, but not limited to, a driver's ssport; and
(b) The original Statement of Education	nal Purpose provided below, which must be notarized.
Stateme	ent of Educational Purpose
I certify that I	am the individual signing this Statement of
· · · · · · · · · · · · · · · · · · ·	
Educational Purpose and that the Federal st educational purposes and to pay the cost of	tudent financial assistance I may receive will only be used for attending
	5 2022 2024
(Name of Postsecondary Educational Institution	for 2023-2024.
(Student's Signature)	(Date)
(Student's ID Number)	
Notary's Ce	ertificate of Acknowledgement
State of	
City/County of	
On hefore me	
(Date)	(Notary's Name)
personally appeared,	and provided to me on
(Printed name of signe	, and provided to me on
basis of satisfactory evidence of identification	onn
	(Type of government-issued photo ID provided)
to be the above-name person who signed to	o foregoing instrument.
WITNESS my hand and official seal	
•	
(seal)	(Notary Signature)
My commission expires on	(- ······) <del>-</del> 8)
(Date)	

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