

**Lawson State Community College**  
**2022-2023 Identity and Statement of Educational Purpose**  
**Federal Student Aid Programs**

**V4/V5**

**Student Information**

_____	_____	_____	_____
Last Name	First Name	M.I.	Student Number (ID number)
_____			_____
Address (include apt. no.)			Date of Birth
_____	_____	_____	_____
City	State	Zip Code	Phone Number (include area code)

**Identity and Statement of Educational Purpose**  
**(To Be Signed at the Institution)**

The student must appear in person at Lawson State Community College to verify his or her identity by presenting a valid 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 student's photo ID that is annotated with the date it was received 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 of Educational Purpose**

I certify that I, \_\_\_\_\_, am the individual signing this Statement of Educational Purpose  
(Print Student's Name)

and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Lawson State Community College for 2022-2023.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Student's ID Number

\_\_\_\_\_  
Date

<p><b><u>For FA Officer's Use Only</u></b></p> <p>_____ Signature of Official Receiving ID</p> <p>_____ Date Received</p>
---