

2024-25 IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

THIS FORM MUST BE DONE IN OUR OFFICE

Student Full Legal Name	Student ID #
The student must appear in person at Schoolcraft College, Office of Fi presenting an UNEXPIRED valid government issued photo identification driver's license, other state issued photo identification, or passport. To student's photo ID that is annotated by the institution with the date in name of the official at the institution authorized to receive and the re	on card. This is, but not limited to, a he institution will maintain a copy of the twas received and reviewed, and the
In addition, the student must sign in the presence of the institutional Purpose below:	official, the Statement of Educational
STATEMENT OF EDUCATIONAL PU	RPOSE
I certify that I am the individual (PRINT STUDENT'S NAME)	l signing this Statement of Educational
Purpose and that the Federal student financial assistance I may receive purposes, and to pay the cost of attending Schoolcraft College for 202	
Student Legal Signature	Date
SIGNATURE MUST BE HANDWRITTEN	