

FRANCIS TUTTLE - FINANCIAL AID IDENTITY VERIFICATION AND STATEMENT OF EDUCATIONAL PURPOSE

Academic year

2024-2025

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Please type or print clearly using only blue or black ink.

Last name	First name		Middle I.	FTTC ID
Local street address	City	State	Zip code	Daytime phone number

This form will not be processed if any items are left blank or illegible.

If clarification of your situation is necessary, additional information or documentation may be required.

PURPOSE

To confirm your identity and certify that the federal student aid you receive will be used only for educational purposes.

INSTRUCTIONS FOR IN-PERSON SUBMISSION

- 1. Visit the Francis Tuttle Technology Center (FTTC) Financial Aid Office with your unexpired valid government-issued photo ID (examples listed below).
- 2. Complete this form in the presence of FTTC Financial Aid staff.
- 3. FTTC staff will make a copy of your photo ID and upload it to your financial aid file.

INSTRUCTIONS FOR MAIL SUBMISSION

- 1. Bring this blank form, a copy of an unexpired valid government-issued photo ID (examples listed below) and your original photo ID to a notary.
- 2. Complete this form in the presence of the notary.
- 3. The notary will complete Section C.
- 4. Mail this form **AND** a copy of your photo ID to Francis Tuttle Technology Center, Financial Aid, 12777 N Rockwell Ave, Oklahoma City, OK 73142.

SECTION A: VALID GOVERNMENT-ISSUED PHOTO ID

Examples of an acceptable unexpired valid government-issued photo ID include but is not limited to:

- Driver's license.
- Other state-issued identification card.
- Passport.

If submitting this form by mail, you must attach a copy of your unexpired valid government-issued photo ID to this form.

SECTION B: STATEMENT OF EDUCATIONAL PURPOSE

Only complete this section in the presence of a notary or this section is left blank, it will be considered incomplete		f
I certify that I	he federal student financial assistance I n	(print your full name) am the individual nay receive will only be used for educational
Signature	Date	Student ID Number

FOR FA OFFICE USE ONLY

Received by (print name):	FA staff signature:	Date form was received:

Last Name	First Name	Middle I.	FTTC ID

SECTION C: NOTARY'S CERTIFICATION OF KNOWLEDGE

State of						
City/County of						
on	hefore me					
(Date)	before me,	(Notary's Name)				
personally appeared,(Printed name of sig	personally appeared,, and proved to me (Printed name of signer)					
on the basis of satisfactory evidence of identification (Type of unexpired government-issued photo ID						
provided) to be the above-named person who signed the foregoing instrument.						
WITNESS my hand written signature and official seal						
(seal)		(Notary signature)				
My commission expires on(Date)						
Note: If the notary statement appears on a separate page from the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized and includes the type of ID used to verify your identity.						

If you need assistance to complete this form, please contact our office at 405-717-4315 or email at finad@francistuttle.edu.