

FULL NAME:

## PURPOSE 2024-2025 (V4)

Identity and Statement of Educational Purpose	
(To Be Signed at the Institution)	
The student must appear <i>in person</i> at <b>Dunwoody College of Technology</b> verify his or her identity by presenting unexpired 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 the student's photo ID that is annotated by institution with the date it was received and reviewed, and the name of the official at the institution authorized receive and review the student's ID. In addition, the student must sign, in the presence of the institutional office the Statement of Educational Purpose provided below.	er the to
I certify that I (Student's Printed Name) am the individual signing this Statement of Educational Purpose and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending <b>Dunwoody College of Technology</b> for 2024-2025.	
Student Signature:Date: Student ID # (not ID badge number):	
Authorized Signature:Date:	

Phone: 612-381-3405 - Email: financialaid@dunwoody.edu - Fax: 612-374-0108