

2025-2026 Independent V4 Worksheet Identity and Statement of Educational Purpose Office of Financial Aid

Student's Informatio	<u>n</u>		
Student's Last Name	Student's First Name	Student's M.I.	CBC ID #
Student's Phone Number			Date of Birth
If returning this form please complete back		e this front page only.	If you are returning this form by mail,
	-	atement of Education Signed at the Institution	
unexpired valid gover other state-issued ID,	nment-issued photo iden or passport. The institution	tification (ID), such as, on will maintain a copy	his or her identity by presenting an but not limited to, a driver's license, of the student's photo ID that is at the institution authorized to collect the
In addition, the stude	nt must sign, in the prese	nce of the institutiona	l official, the following:
	Stateme	nt of Educational Purp	oose
Educational Purpose	rint Student's Name)	ent financial assistance	igning this Statement of I may receive will only be used for <u>College</u> for 2025-2026.
 Student Signature		 	 te

Identity and Statement of Educational Purpose (To Be Signed in the Presence of a Notary)

If the student is unable to appear in person at <u>Coastal Bend College</u> to verify his or her identity, the student must provide to the institution:

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, other state-issued ID, or passport; and
- (b) The original Statement of Educational Purpose provided below, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

Statement of Educational Purpose

I certify that I	am the individual signing this Statement of Educational
(Print Student's Name	 e)
Purpose and that the federal student fin purposes and to pay the cost of attendin	ancial assistance I may receive will only be used for educational g <u>Coastal Bend College</u> for 2025-2026.
Student Signature	Date
Student ID number	
	y's Certificate of Acknowledgement
State of	
City/County of	
On, before me	,
(Date)	(Notary's name)
	, and provided to me
•	d name of signer)
on basis of satisfactory evidence of ident	tification
	(Type of government-issued photo ID provided)
to be the above-named person who sign	ed the foregoing instrument.
WITNESS my hand and official seal	
(seal)	
	(Notary Signature)
My commission expires on	
(Date)

Coastal Bend College does not discriminate on the basis of race, creed, color, national origin, gender, age or disability.