

Financial Aid Office

1000 W Campus Drive Wausau, WI 54401-1899

Phone: 715.803.1647 * Fax: 715.301.2904

Email: financialaid@ntc.edu

IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

Last Name	First Name	M.I.	NTC St	udent ID
Address (include apt. no.)	E-	mail Address	Date o	f Birth
City	State		Phone Number (include area code)	
SECTION A: CAN YOU APPEAR	N PERSON? YES.			
government-issued photo identifica bassport. NTC will maintain a copy and reviewed, and the name of the l n addition, the student must sig	of the student's photo ID that i NTC official authorized to receiv	s annotated by ve and review tl	NTC FAO ne studer	with the date it was received nt's ID.
		ciai Aiu Office	starr me	ember of mstitutional
official, the Statement of Educatio		NAL PURPOSE	starr me	For Office Use Only Check this box if a copy of the student's ID was collected and is attached.
official, the Statement of Education IDENTITY A	nal Purpose provided below. AND STATEMENT OF EDUCATIO gned at Northcentral Technic	NAL PURPOSE	starr me	For Office Use Only Check this box if a copy of the student's ID was collected and is
IDENTITY / (To Be Si I certify that I Print stude am the individual signing this Stat student financial assistance I may	nal Purpose provided below. AND STATEMENT OF EDUCATIO gned at Northcentral Technic nt's Name ement of Educational Purpose a receive will only be used for ec	NAL PURPOSE cal College) and that the Fed	- eral	For Office Use Only Check this box if a copy of the student's ID was collected and is attached. Print NTC Staff Name
IDENTITY / (To Be Since the Statement of Education) IDENTITY / (To Be Since the Statement of Education) I certify that I Print stude am the individual signing this Statement of Education in the Education in	nal Purpose provided below. AND STATEMENT OF EDUCATIO gned at Northcentral Technic nt's Name ement of Educational Purpose a receive will only be used for eclorthcentral Technical College for	NAL PURPOSE cal College) and that the Fed ducational purpor 2025-2026.	- eral oses	For Office Use Only Check this box if a copy of the student's ID was collected and is attached.

Attention:

If you are unable to appear in person at Northcentral Technical College to verify your identity and to sign the statement of educational purpose, please see the next page and complete section B of this form.

to jail, or both.

IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

SECTION B of the form cannot be scanned or faxed.

If the student is unable to appear in person at Northcentral Technical College 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, such as, but not limited to, a driver's license, other state-issued ID, or passport (Note: an NTC student ID is not a valid form of ID); AND
- B. The <u>original</u> 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.

IDENTITY and STATEMENT OF EDUCATIONAL PURPOSE

(To Be Signed in the Prescence of a Notary)	
I certify that I	
Print Student's Name	
am the individual signing this Statement of Educational Purpose and that the Federal s receive will only be used for educational purposes and to pay the cost of attending No 2025-2026.	tudent financial assistance I may orthcentral Technical College for
By signing this form, I certify that all of the information reported on it is complete an	d correct.
Student Signature	Date
	Notain: Sool
NOTARY CERTIFICATE OF ACKNOWLEDGMENT	Notary Seal
(Notary signature/seal required if student is not providing information in person. Notaries can often be found at local banks, credit unions, insurance agencies or shipping stores. Certification may vary by state)	
State of: City/County of:	
On — before me, — Notary Name	
personally appeared, ————————————————————————————————————	e
Printed name of signer	
on the basis of satisfactory evidence of identification	
Type of unexpired government- issued photo ID provided	
to be the above name-named person who signed this foregoing instrument.	
WITNESS my hand and official seal	
———— My commission expires on ————	_
Notary signature Date	
WARNING: If you purposely give false or misleading information on this worksheet	, you may be fined, be sentenced