



Texas Southmost College

TRADITION • INNOVATION • OPPORTUNITY

Financial Aid Office

80 Fort Brown • Brownsville, Texas 78520 • (956) 295-3620 • Fax (956) 295-3621 • www.tsc.edu

2016-2017 Identity and Statement of Educational Purpose

Student Name: _____ **ID#** _____ **Phone# ()** _____

The student must appear in person at **Texas Southmost College** to verify his or her identity by presenting 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 with the date it was received and the name of the official at the institution authorized to collect the student's ID.

In addition, the student must sign, in the presence of the institutional official, the following:

Statement of Educational Purpose

I certify that I _____ am the individual signing this
(Print Student's Name)

Statement of Educational Purpose and that the federal student financial assistance that I may receive will only be used for educational purposes and to pay the cost of attending **Texas Southmost College** for 2016-2017.

(Student's Signature)

(Date)

Declaración de Propósito Educativo

Certifico que yo, _____, soy el individuo que firma esta
(Imprimir Nombre del Estudiante)

Declaración de Finalidad Educativa y que la ayuda financiera federal estudiantil que yo pueda recibir, solo sera utilizada para fines educativos y para pagar el costo de asistir a **Texas Southmost College** para 2016-2017.

(Firma del Estudiante)

(Fecha)

**** Please note that this form must be submitted and signed in person at the Financial Aid Office located in the Arnulfo Oliveira Student Service Center (Form cannot be submitted via fax, drop box, or email). You must bring an original photo identification (no copies). Expired photo identification will not be accepted. **MILITARY IDENTIFICATION IS NOT ACCEPTABLE (photocopying of military identification is not authorized under the U.S. Department of Defense).****

For Office Use Only

Received by: _____ Date: ____/____/____