



2026–2027 Identity / Statement of Educational Purpose Verification

Financial Aid Office

1637 Lawson Street, Durham, NC 27703

Phone: 919-536-7209 Fax: 919-536-7260

Email: financialaid@durhamtech.edu

Section A: Student Information (Required)

Student Name: _____ Student ID: _____

Date of Birth: _____ Phone Number: _____

Street Address: _____

City, State, ZIP: _____

Section B: Identity and Statement of Educational Purpose (Required)

The student **must appear in person** at **Durham Technical Community College** to verify their identity by presenting a **valid, unexpired government-issued photo identification (ID)**, such as, but not limited to:

- Driver's license
- State-issued identification card
- Passport

The institution will retain a **copy of the student's photo ID**, which will be annotated with:

- The date it was reviewed, and
- The name of the institutional official authorized to review the ID

The student must also sign the **Statement of Educational Purpose** below **in the presence of a Financial Aid Office representative**.

Statement of Educational Purpose

I certify that I, **(print student name)** _____, am the individual signing this Statement of Educational Purpose, and that the federal student financial assistance I may receive will be used **only for educational purposes** and to pay the cost of attending **Durham Technical Community College** for the **2026–2027 academic year**.

Student Signature: _____ Date: _____

(Handwritten signatures required; electronic signatures are not accepted.)

Institutional Verification (For Office Use Only)

Verified By (Print Name): _____

Title: Financial Aid Representative

Signature: _____

Date: _____

Section C: Identification Documentation (Required)

Submit a **copy of your unexpired, government-issued photo ID.**

Acceptable IDs include:

- Driver's License
- State-Issued Identification Card
- Passport

Not acceptable:

- Durham Technical Community College Student ID
- Military ID

Section D: Certification and Student Signature (Required)

NOTE: This form must be **hand-signed**. Electronic or typed signatures are **not permitted**.

By signing below, I certify that **all information provided is true, complete, and accurate.**

⚠ WARNING: If you knowingly provide false or misleading information, you may be fined, imprisoned, or both under federal law.

Student Signature: _____

Date: _____

(Handwritten signatures required; electronic signatures are not accepted.)