ENROLLMENT SERVICES, OFFICE OF FINANCIAL AID

Blue Bell Campus College Hall, 340 DeKalb Pike, Blue Bell, PA 19422

Pottstown Campus South Hall, 101 College Drive, Pottstown, PA 19464



E FinancialAid@mc3.edu | P 215.641.6566

2021-22 PROOF OF IDENTITY & STATEMENT OF EDUCATIONAL PURPOSE

DO NOT FILL IN THIS WORKSHEET UNLESS YOU ARE IN THE PRESENCE OF AN MCCC ENROLLMENT SERVICES REPRESENTATIVE OR A NOTARY PUBLIC!

Student Name		Student ID	
Valid Photo Documentation of Ide	ntity		
complete Step 2 on the copied docume	nt in their presence - copy of your valid pho	tive hand your photo ID to the represent OR - If you are completing this form in to to ID that is acknowledged in the notary ed ID, or passport, to this worksheet.	he presence of a
IF COMPLETING IN PERSO	ON AT MCCC:		
MCCC Enrollment Services rep valid (unexpired) governme identification (ID) over this s photocopy of this	nt-issued photo pace and make a		
Student will then complete the Educational Purpose on the co	he Statement of opied document.		
If the student's ID does not fit in attach an annotated copy of t	the space provided, ne ID to this form.	Proof of identification received and review	ed by:
.,		Print First & Last Name of MCCC Represente	tive Date
that the Federal student financial assist of attending Montgomery County Comr	ance I may receive wi munity College for 202	ll only be used for educational purposes 21-2022.	and to pay the cos
		Student's Signature	Date
IOTARY'S CERTIFICATE OF ACKNOWLED	OGEMENT (ONLY NEC	ESSARY IF NOT completing in person at N	ИССС.)
State of	, City/County of on		n
			(Date)
before me,	, personally appeared(Printed name of signer)		
(Printed name of Notary) and proved to me on basis of satisfacto	ry evidence of identifi	. , , ,	ner)
and proved to the on basis of satisfacto	ry evidence of identifi	(Type of unexpired government-issued	nhoto ID provided)
to be the above-named person who sign	ned the foregoing inst	. ,, , ,	prioto 12 provided)
WITNESS my hand and official seal			_
(seal)	(Notary Signature)		
	My commiss	ion expires on	
		(Date)	
		t, mail this ORIGINAL notarized document A	