



501 Varsity Road
Griffin, GA 30223
P: 770-228-7368
F: 770-229-3029

Locations
1533 Hwy 19 South
Thomaston, GA 30286
P: 706-646-6386
F: 706-646-6063

300 Lakemont Drive
McDonough, GA 30253
P: 770-467-6049
F: 770-914-4424

2022-2023 Statement of Education Purpose

Please Type or Print clearly in BLUE or BLACK ink

Federal Student Aid Programs: Your application was selected for review in a process called "Verification." In this process, the Office of Financial Aid will be comparing information from your application with your (and your parent(s), if a dependent student or your spouse, if an independent student) financial documents. We are required to review your FAFSA information under financial aid program rules (34 CFR, Part 668). The law states we have the right to ask you for this information before awarding Federal Aid. If there are differences between your application and your financial documents, corrections to your FAFSA may be required.

Student's Last Name		Student's First Name		Student's M.I.	Southern Crescent Student ID #
Student's Street Address (include apt. no.)				Student's Date of Birth	
City	State	Zip Code	Student's Email Address		
Student's Home Phone Number (include area code)			Student's Alternate or Cell Phone Number		

Identity and Statement of Educational Purpose (To Be Signed in the Office of Financial Aid at Southern Crescent Technical College)

The student must appear, **in person**, at Southern Crescent Technical College Office of Financial Aid to verify his or her identity by presenting an unexpired 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 by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

In addition, **the student must sign, in the presence of the institution official**, the Statement of Educational Purpose provided below:

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

of Educational Purpose and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Southern Crescent Technical College for 2022-2023.

Student Signature: _____ Date: _____

Student ID#: _____

Certification and Signature

Each person signing below certifies that all of the information reported in this worksheet is complete and correct. The student must sign this worksheet.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student's Signature

Date

Parent's Signature (Required if Dependent Student)

Date

Please submit this worksheet to the Office of Financial Aid

Office of Financial Aid Use Only:

The above-named individual personally appeared before me and provided the proper valid government –issued photo ID, in which a copy was obtained with this form.

Name of Financial Aid Administrator who reviewed identification: _____

Date Received: _____

As set forth in full in the Student Handbook/Course Catalog, Southern Crescent Technical College is an Equal Opportunity Institution and does not discriminate on the basis of race, color, national origin, sex, age or disability. Revised 05/24/2022