

2022-2023

Identity and Statement of Educational Purpose (FISEP)

Student's Name (PRINT):		Phone: ()
HCC ID: (9-digit number required)	Date of Birth:///////	Home Campus: (Primary location of attendance)

DO NOT complete this form in advance. Your application has been selected for verification and confirmation of your identity is required prior to receiving financial aid. This must be completed in the presence of an approved representative of HCC if you are submitting this form in person. If you are not submitting this form in person, it must be completed and signed in the presence of a Notary Public and mailed to HCC, ATTN: Financial Aid Office, 3100 Main Street, Houston, TX 77002.

Identity and Statement of Educational Purpose

You must present valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other stateissued ID, or passport to verify your identity. HCC will maintain a copy of your photo ID with this form.

I certify that I, ______, am the individual signing this Statement of Educational (Print student's name)

Purpose and that the federal student financial assistance I may receive will only be used for educational purposes to pay the cost of attending Houston Community College for 2022-2023.

Student's Signature:_____

Date:

By signing above, the student acknowledges and confirms that the above information is complete and correct. Purposely giving false or misleading information may result in federal fines, jail sentence, or both.

To be completed by an HCC Financial Aid Office Representative (in-person submissions)

The student has signed this form in my presence and the student has presented a valid government-issued photo identification, such as, but not limited to, a driver's license, other state-issued ID, or passport to verify his or her identity. I have made a copy of this document, annotated the ID with the HCC ID Number and the date it was received, and attached the documentation to this form.

HCC Financial Aid Representative Name:	Title:
HCC Financial Aid Representative Signature:	Date:

HCC is committed to a workplace and educational environment free of discrimination and harassment based upon race, color, religion, age, sex, gender, national origin, disability, status as a veteran, or sexual orientation. Phone: 713-718-8490



2022-2023

Identity and Statement of Educational Purpose Notary Certificate

Student's Name (PRINT): ______

HCC ID:_____

Date:_____

DO NOT complete this form in advance. If you are not submitting this form in person, it must be completed and signed in the presence of a Notary Public and mailed to HCC, ATTN: Financial Aid Office, 3100 Main Street, Houston, TX 77002.

Identity and Statement of Educational Purpose

You must present a valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other stateissued ID, or passport to verify your identity. A copy of your photo ID must accompany this form.

I certify that I, ______, am the individual signing this Statement of Educational (Print student's name) Purpose and that the federal student financial assistance I may receive will only be used for educational purposes to pay the cost of attending Houston Community College for 2022-2023.

Student's Signature:_____

By signing above, the student acknowledges and confirms that the above information is complete and correct. Purposely giving false or misleading information may result in federal fines, jail sentence, or both.

	To be completed by a N	otary Public (mail submissions)	
State of	City/County of		
on	, before me,		
(Date)		(Notary's name)	
personally appeared _	(Printed name of signer)	, and provided to me on basis of satisfactory evidence of	
identificationto be the above-named person who (Type of government-issued photo ID provided, including ID number)			
signed the foregoing ir	nstrument.		
WITNESS m	y hand and official seal (seal)		
		(Notary Signature)	

My commission expires on ___

(Date)

HCC is committed to a workplace and educational environment free of discrimination and harassment based upon race, color, religion, age, sex, gender, national origin, disability, status as a veteran, or sexual orientation. Phone: 713-718-8490