



1 College Place
Claremont, NH 03743
Phone: 603.542.7744 800.837.0658
Fax: 603.543.1844
Website: www.rivervalley.edu

Keene Academic Center
Cheshire House, 67 Winchester Street
Keene, NH 03431
Phone: 603.357.2142
Fax: 603.357.0408

Lebanon Academic Center
15 Hanover St, Lebanon, NH 03766
Phone: 603.443.4200
Fax: 603.443.6167

**2020-2021 VERIFICATION OF
IDENTITY/STATEMENT OF EDUCATIONAL PURPOSE
(To be signed at the Institution)**

Student Name (print) _____ **Student ID#/SSN** _____

The student must **appear in person** at River Valley Community College
(Name of Postsecondary Educational Institution)

To verify their identity by presenting a 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 I may receive will only be used for educational purposes and to pay the cost of attending River Valley Community College for 2020-2021.
(Name of Postsecondary Educational Institution)

(Student's Signature) (Date)

(Student's ID Number)

FOR OFFICE USE ONLY

Date Received: _____
Received by: _____