

(Staff Initials)

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Office of Financial Aid Elizabethtown College One Alpha Drive Elizabethtown, PA 17022

Phone: (717) 361-1404 Fax: (717) 361-1514 Email: finaid@etown.edu

Last Name:	First Name:	Student ID:
	ore awarding Federal Student Aid,	s selected for review in a process called we are required to verify your identity
a member of the Elizabethtown Collections to complete these sections in	ege Office of Financial Aid (page 1) n front of a Notary, the Notary mus	either complete the sections in front of or in front of a Notary (page 2). If you st complete the Certificate of ember of the Financial Aid Staff or
	Identity Confirmation (To be Signed at the Institution	
The student must appear in person at Elizabethtown College to verify their identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issues 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.		
For Financial Aid Office Use Only		
(Staff Signature)		(Date)

Identity Confirmation(To be Signed in the Presence of a Notary)

If the student is unable to appear in person at Elizabethtown College to verify his or her identity, the student must provide the following to the institution:

(a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to: a driver's license, other state-issued ID, or passport.

Identity Confirmation		
State of	_,	
	·	
On, before me,		
(Date)	(Notary's Name)	
personally appeared(Printer	, and proved to me d Name of Signer/Student)	
Because of satisfactory evidence of identification to be the above-named person who signed	(Type of unexpired government-issued photo ID provided) d the foregoing instrument.	
WITNESS my hand and official seal		
(Seal)	(Notary Signature)	
	My commission expires on(Date)	

Please return completed forms to:

Office of Financial Aid Elizabethtown College One Alpha Drive Elizabethtown, PA 17022