## MILWAUKEE AREA Technical College

## 2025-2026 IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

Your 2025-2026 Free Application for Federal Student Aid (FAFSA) was selected for a process called verification. The law states that colleges must verify the information you and your parent(s) report on the FAFSA before federal student aid is disbursed. To verify that you provided correct information, financial aid administrators will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need corrections and could affect the student federal eligibility. You and at least one parent who filed your FAFSA must submit this completed signed worksheet with any required documents to the MATC Financial Aid Office. We may ask for additional information. If you have questions about verification, contact the MATC Financial Aid Office at finaid@matc.edu

Student's Last Name	Student's First Name	Middle Initial	Student ID Number
Student's Street Address (Include A	Apartment Number)		Student's Date of Birth
City	State	Zip Code	Email Address
Home Phone Number (Include Area Code)		Cell Phone Number	
As part of the verification to verify your identity by p	ENT OF EDUCATIONAL PUR process, you must appear in p resenting an unexpired valid g	erson at MATC's Financovernment-issued photo	identification (ID). The instit
As part of the verification to verify your identity by p will maintain a copy of the reviewed, and the name of	process, you must appear in p	erson at MATC's Finance overnment-issued photo otated by the institution uthorized to receive and	o identification (ID). The instit with the date it was received I review the student ID.
As part of the verification to verify your identity by p will maintain a copy of the reviewed, and the name of the addition, the student mutual student mutu	process, you must appear in presenting an unexpired valid great student's photo ID that is annual of the official at the institution a sust sign, in the presence of the	erson at MATC's Finance overnment-issued photo otated by the institution uthorized to receive and	o identification (ID). The instit with the date it was received I review the student ID. Statement of Educational

\*\* Your signature above must be witnessed by either a MATC staff member at MATC's Financial Aid Office or Welcome Center or by a Notary. If completed by Notary, please mail the worksheet and unexpired valid government-issued photo identification (ID) to the address on the form or submit the completed form in person. DO NOT EMAIL OR FAX THIS FORM.

Financial Aid Office: 700 West State Street, Room S115 ■ Milwaukee, WI 53233-1443 ■ Phone: 414-297-6282 ■ Fax: 414-297-6466 matc.edu finaid@matc.edu

## **IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE**

(To Be Signed in the Presence of a Notary)

If the student is unable to appear in person at MATC's Financial Aid Office or Welcome Center to verify their identity, the student must provide to the institution:

- 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; and
- The original Statement of Educational Purpose provided above, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT (Only complete this section if you cannot appear in person)			
State of	City/County of		
On	, before me,,		
Date	Notary's Name		
personally appeared,	, and Printed name of signer		
provided to me on basis of satisfactory eventors to be the above-named person who sign	Type of government-issued photo ID provided uned the foregoing instrument.		
WITNESS my hand and official seal (Seal)	Notary Signature		
My commission expires on	 Date		