

BMCC Financial Aid Office 2411 NW Carden Ave Pendleton, OR 97801 Phone: 541-278-5779 Fax: 541-278-5889

Email: FinancialAid@bluecc.edu

2024-2025 V4 VERIFICATION WORKSHEET

STUDENT NAME:	BMCC ID:			
Your Free Application for Federal Student Aid (FAFSA®) was selected for review in a process called "Verification." In this rocess, the Financial Aid Office will compare information from your FAFSA® with the financial aid documents you rovide and make any necessary corrections. Corrections may affect your eligibility for aid. Complete this form based or ne information you provided on your 2024-2025 FAFSA®.				
PART 1a: Verification of Identity				
Purpose (to be signed in person at BN	MCC)			
ou must appear in person at Blue Mountain Community College to verify your identity by presenting an unexpired validate overnment-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport MCC will maintain a copy of your photo ID annotated with the date it was received and the name of the BMCC statement authorized to collect it.				
In addition, you must complete and sign, in the present	ce of the BMCC staff member, the following:			
Statement of Educational Purpose				
•	am the individual signing this Statement of			
-	inancial Assistance I may receive will only be used for educational ntain Community College for the 2024-2025 academic year.			
Student Signature:	Date:			
To be completed by BMCC Service Center Specialis	t or staff member:			
Government Issued Photo ID:				
(ID Type)	(Number)			
BMCC Staff Name:(staff name printed)	Date:			
(staff name printed) BMCC Staff Signature:				
-	n copy of Photo ID with date received and your name on it.			
If you cannot appear in person, please use the following Notary (who must also review your valid government-is	g page, which must be completed and signed in the presence of a succeed photo identification).			
status, sexual orientation, religion, national origin, age or disability in any educat	pol District that there will be no discrimination or harassment on the grounds of race, color, sex, marital tional programs, activities or employment. Persons having questions about equal opportunity and w Hall, Blue Mountain Community College, 2411 NW Carden, Pendleton, OR 97801, Phone: 541-278-			

V4 Form

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PART 1b: Verification of Identity and Statement of Educational Purpose (use this section if you cannot appear in person at BMCC)

If you live outside Umatilla or Morrow Counties, or otherwise cannot appear in person, please use this page, which must be completed and signed in the presence of a Notary (who must also review your valid government-issued photo identification).

If you are unable to appear in person at Blue Mountain Community College to verify your identity, you must provide:

(a) A <u>copy</u> of an 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*

(b) The <u>original</u> notarized Statement of Ed	ducational Purpose provided below MUST be con	mpleted in BLUE INK.
State	ment of Educational Purpose	
(print student's name)	am the individual signing thi	
pay the cost of attending Blue Mountain Con	al assistance I may receive will only be used for nmunity College for 2024-2025.	reducational purposes and to
Student Signature:	Σ	Oate:
BMCC Student ID #		
Notary's	Certificate of Acknowledgement	
State of	City/County of	
On, before	me(Notary's name)	,
(Date)	(Notary's name)	
personally appeared,(Printed name	e of signer)	, and proved to me on
basis of satisfactory evidence of identification	n(Type of unexpired government-issued photo	to be o ID provided)
the above-named person who signed the fore		
WITNESS my hand and official seal	(Notary Signature)	– (seal)
My commission expires on(Dat	·	(seur)

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