

Financial Aid/EOPS Office +2277 Napa-Vallejo Hwy + Napa, CA 94558 Main (707) 256-7301 + Toll Free (800)826-1077

## 2025-2026 V4 Verification Packet

Student ID #	Date of Birth			
Student Legal Name				
Mailing Address			Apartment/Space #	
City		State	Zip	
Cellular Phone #		Home Phone #		
Email Address				

## 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 Napa Valley College to verify his or her identity, the student must provide 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; and
- (b) The original Statement of Educational Purpose provided below, 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.

## Statement of Educational Purpose

I certify that I	a	am the individual signing this		
	(Print Student's Name)			
	nal Purpose and that the Federal stude ational purposes and to pay the cost c	ent financial assistance I may receive will of attending Napa Valley College for		
Student's Signature	Date	Student's ID #		
Not State of	ary Certificate of Ack	C		
City/County of				
On	, before me,			
(Date)	, before file,	(Notary's name)		
personally appeared,		, and proved to r	ne	
		• •		

(Printed name of signer) because of satisfactory evidence of identification

(Type of unexpired government-issued

photo ID provided) to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal		
(seal)		
		(Notary signature)
My commission expires on		
	(Date)	