



# Southwestern Michigan College

## 2025-2026 Identity and Statement of Educational Purpose

Financial Aid Office, 58900 Cherry Grove Road, Dowagiac, MI 49047  
Phone: 269.783.2143 Fax 269.783.2114 Email: finaid@swmich.edu



### **\*\*To Be Signed at the Institution\*\***

#### **Instructions:**

The student must appear in person at Southwestern Michigan College to verify his or her identity by presenting 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 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.

In addition, the student must sign, *in the presence of the institutional official*, the Statement of Educational Purpose provided below.

### **Statement of Educational Purpose**

I certify that I, \_\_\_\_\_ am the individual signing this Statement of  
Print Student's Name  
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 \_\_\_\_\_  
(Name of Postsecondary Educational Institution)  
for 2025-2026.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student's ID Number

_____ SMC Staff Signature	_____ Date	Yes <input type="checkbox"/> _____ Copy of Identification
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