

2023-2024 Form 4 –High School and ID

Financial Aid Office

Bristol Community College

777 Elsbree Street

Fall River, MA 02720

Your 2023-2024 FAFSA was selected for review in a process called verification. To verify that you provided correct information, we will compare your FAFSA with the information on this document. If there are differences, your FAFSA information may need to be corrected. We may ask for additional information or documentation. If you have questions about verification, contact the Bristol Financial Aid Office as soon as possible so that your financial aid will not be delayed.

900 _____ - _____ - _____ / ____ / ____ / _____
Bristol ID number Social Security number Date of Birth

Last Name of Student First Name of Student M. I.

Street Address City State ZIP

Home Phone Cell Phone

Stop here and read directions below.

What you need to do:

- You need to complete this form in person at the Bristol Financial Aid Office.
- You must appear, in person, to verify your identity
- You must present a valid government-issued photo identification (ID) such as an unexpired driver's license, other state issued ID, or passport
- Call the office at 774-357-2515 to arrange to meet with a Financial Aid Office associate.
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Statement of Educational Purpose

I certify that I (print your name)

_____, am the individual signing this Statement of 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 Bristol Community College for 2023-2024.

Student's Signature _____ Date _____
Student's ID Number _____

Declaración de Propósito Educativo

Certifico que yo, [Imprimir Nombre del Estudiante]

_____, soy el individuo que firma esta Declaración de Propósito Educativo y que la ayuda financiera federal estudiantil que yo pueda recibir sólo será utilizada para fines educativos y para pagar el costo de asistir a Bristol Community College para 2023-2024.

Firma del estudiante _____ la Fecha _____
Número de identificación del estudiante _____

Financial Aid Office Associate:

1. Student must sign this statement in your presence
2. FAO associate must sign this form
3. FAO associate must photocopy ID, sign, indicate copied from original and date received
4. FAO retains ID copy and this statement for processing

Financial Aid Associate Signature _____ Date _____