

## 2020-2021

## Proof of Identity/Statement of Educational Purpose Student Financial Services • 1500 College Parkway • Elko, NV 89801

FAX #: (775) 753-2390 Phone #: (775) 753-2399

WEB SITE: www.gbcnv.edu/financial Email: financial-aid@gbcnv.edu

Student Name:		Date of Birth:	Student ID	
Home Address	PO Box#	City	State	Zip Code
Cell Phone#	Work Phone:	Valid Email Address:		

Please submit: a copy of valid government-issued photo identification, including but not limited to a
driver's license, or military identification or a valid passport.
I, (print name), certify that the federal financial aid received will only be used for
educational purposes to pay the cost of attending Great Basin College for 2020-2021.
Student Signature:Date:
By signing this worksheet, I certify that all information reported on this worksheet is complete and correct under penalty of perjury.
Jurat
State ofCounty of Subscribed and sworn/affirmed to before me this
date of 20, by
by
Notary Public
,
My Commission Expires:
Please note: This form cannot be faxed or emailed.
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