

2024-2025

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

FAX #: (775) 327-5105 Phone #: (775) 327-2095 WEB SITE: www.gbcnv.edu/financial Email: financial-aid@gbcnv.edu

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

Proof of Identity/Statement of Educational Purpose (Student Only)						
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.						
l (mint manna)	cortifu that the fode	ral financial aid received will only be used for				
, (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 2024-25 .						
educational purposes to pay the cost of attending dreat basin conege for 2024-25 .						
Student Signature:	Date:_	Date:				
By signing this worksheet, I certify that all information reported on this worksheet is complete and correct under penalty of perjury.						
Jurat						
		Subscribed and sworn/affirmed to before me this				
	, by	_··				
Notary Stamp/Seal	Notary Public					
	•					
	•	·				
		CityST Zip				
Please note: This form cannot be faxed or emailed.						
This original form mus	st be submitted in person to the GBC Elko	Campus or to the respective GBC Off-Campus Centers. The				
	form to the GBC Elko Financial Aid Campus					
	Out of state students will need to submit the original form by mail.					
 Please submit a copy of valid government-issued photo identification, including but not limited to a <u>driver's license</u>, or <u>military identification</u> or a valid <u>passport</u>. 						
military identification of a valid passport.						
Individuals who willfully submit fraudulent information and/or documentation to obtain federal funds will be						
investigated to the fullest extent possible. Cases of fraud will be reported to the Office of the Inspector General in Washington D.C						
wasnington b.c						
I hereby certify that the information provided is true and correct to the best of my knowledge. If I purposely give false or						
misleading information to establish eligibility for Federal Financial Aid , I may be subject to \$10,000 fine, prison sentence, or						
both.						
	Student Signature	Date				