



**CHADRON  
STATE COLLEGE**

Return Information to: CSC START Office  
1000 Main Street, Chadron NE 69337  
Scan & Email to: [start@csc.edu](mailto:start@csc.edu)  
Fax to: (308) 432-6474 or (308) 432-6058  
Phone: (308) 432-6060

**2016-2017**

## Identity and Statement of Educational Purpose

_____ Student's Last Name	_____ Student's First Name	_____ Student's M.I.	_____ Student's NUID or Social Security #
_____ Student's Street Address (include apt. no.)			_____ Student's Date of Birth
_____ City	_____ State	_____ Zip Code	_____ Student's Email Address
_____ Student's Home Phone Number (include area code)			_____ Student's Alternate or Cell Phone Number

You are required to appear in person at Chadron State College to verify your identity by presenting a valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. CSC will maintain a copy of your photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect the student's ID.

In addition, you must sign, ***in the presence*** of the institutional official, the following:

**Statement of Educational Purpose**

I certify that I \_\_\_\_\_ am the individual signing this  
(Print Student's Name)

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 Chadron State College for 2016–2017.

STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_