



Student Name: _____ **Student NUID:** _____

Phone Number: _____ **Birth Date:** _____

Identification Verification

Please Note: You are required to appear “**in person**” at Chadron State College to verify your identity by presenting an unexpired, 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.

If you are unable to come to campus, please contact the START Office at start@csc.edu.

In addition, you **must sign in the presence** of a Chadron State College 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 2025–2026.

WARNING: If you purposely give false or misleading information you may be fined, sentenced to jail, or both. ***Electronic signatures are not accepted.***

STUDENT SIGNATURE: _____ DATE: _____

Return Form To: CSC START Office

1000 Main Street, Chadron NE 69337

 Fax: (308) 432-6474  Phone: (308) 432-6061