2026-2027

Identity Statement Student Financial Aid Office



| Name: | Student ID: |
|---|--|
| | D. If you are not able to bring your ID to campus in person, |
| (Student's Signature) | (Date) |
| FA Office Use only – This form | is <u>Not</u> Acceptable Via Email or Fax |
| In Person | Received via Virtual Appointment |
| □ Verified Government Issued Photo ID is legitimate, is the likeness of the person presenting it, and make a copy of photo ID | ☐ Use Teams to meet w/your Advisor if not available to come in person. |
| ☐ Witnessed student signing form | Staff signature |
| □ Date stamp all documents. | |

Return this form, physical State ID, and ALL other requested documentation to your local SWTX Campus.

SWTX UVALDE CAMPUS 2401 GARNER FIELD ROAD UVALDE, TX 78801 830-591-7368 SWTX DEL RIO CAMPUS 207 WILDCAT DRIVE DEL RIO, TX 78840 830-775-1579 SWTX EAGLE PASS CAMPUS 4003 HIGHWAY 227 SOUTHEAST EAGLE PASS, TX 78852 830-758-4116