



# Identity Verification

## Instructions

Please complete all information on this form in the presence of a *Notary* or *Excelsior College employee*.  
Mail to the Office of Registration and Records, Excelsior College, 7 Columbia Circle, Albany, NY 12203-5159.  
**\*PLEASE NOTE: WE WILL NOT ACCEPT THIS FORM VIA FAX OR EMAIL**

### Name

\_\_\_\_\_ **Student last 4 digits of SSN:** \_\_\_\_\_  
First, Last

Type of valid, government-issued, photo identification viewed by *Notary* or *Excelsior College employee*:

- Driver's License (or other state-issued photo ID)
- Passport
- Military DoD
- Other (describe—ID must include an image of your signature) \_\_\_\_\_

**NOTE: You are required to provide a copy of the ID viewed along with this notarized form.**

### Student (must sign)

I attest that I am the above named person.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Notary Identification Verification

State of \_\_\_\_\_ County of \_\_\_\_\_

I hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, \_\_\_\_\_ personally appeared before me the signer and subject of the above form, who signed or attested to the same in my presence and presented the above valid form of identification as proof of his or her identity:

Notary Public: \_\_\_\_\_  
(Print Name)

My Commission Expires: \_\_\_\_\_

Notary Public Signature: \_\_\_\_\_

### Excelsior College Staff Use Only

### Staff Identity Verification

I attest that I, \_\_\_\_\_, have viewed the above photo identification and verify the identify of \_\_\_\_\_ for the purposes of attending Excelsior College.

Excelsior College Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_