**Explicit written consent** (If Cannot Appear in Person to Be Signed with Notary)

Student's Last Name	Student's First Name	Student's M.I.	Student's Identification Number
Student's Street Add	ress (include apt. no.)		Student's Date of Birth
City	State	Zip Code	Student's ACC Email Address
Student's Home Pho	ne Number (include area code)		Student's Alternate or Cell Phone Number
(Student	should Sign with Notary if	student cannot a	appear in person at school)
the student is unable	to appear in person at A	lamance Community	College
	(Name of ten consent, the student must prov	of Postsecondary Educa	College ational Institution)
	government-issued photo identific uch as but not limited to a driver's		
	den as out not minica to a driver s	s license, other state-i	ssued ID, or passport, and
	ed explicit written consent provide		ssued ID, or passport, and
The original notarized I certify that I explicit written	ed explicit written consent provide	ed below(Print Student's Nam y College to release n	
The original notarized I certify that I explicit written	ed explicit written consent providence consent for Alamance Community ool year to	ed below(Print Student's Nam y College to release n	ne) am the individual signing this
I certify that I explicit written 2023-2024 sch	ed explicit written consent providence consent for Alamance Community ool year toture)	ed below(Print Student's Nam y College to release n	ne) am the individual signing this
I certify that I explicit written 2023-2024 sch  (Student's Signa  Notary's Certify that I explicit written 2023-2024 sch	ed explicit written consent providence consent for Alamance Community ool year to	ed below(Print Student's Nam y College to release n  (Date)	ne) am the individual signing this my student financial aid information for t
I certify that I explicit written 2023-2024 sch  (Student's Signa  Notary's Certification of Con	ture)  tificate of Acknowledgement  City/C  , before me,	ed below.  (Print Student's Name of College to release in County of	ne) am the individual signing this my student financial aid information for t
I certify that I explicit written 2023-2024 sch  (Student's Signa  Notary's Certify that I explicit written 2023-2024 sch	ture)  tificate of Acknowledgement  City/C  , before me,	ed below.  (Print Student's Name of College to release in County of	ne) am the individual signing this my student financial aid information for the student financial aid information.
I certify that I explicit written 2023-2024 sch  (Student's Signa  Notary's Certify that I explicit written 2023-2024 sch	ture)  tificate of Acknowledgement  City/C  , before me,	ed below(Print Student's Name y College to release note	ne) am the individual signing this my student financial aid information for the student financial aid information.
I certify that I explicit written 2023-2024 sch  (Student's Signa  Notary's Certify that I explicit written 2023-2024 sch  (Student's Signa  Notary's Certify that I explicit written 2023-2024 sch	ture)  tificate of Acknowledgement  City/C  , before me,  (Printed name of signer)	cd below. (Print Student's Name y College to release note	ne) am the individual signing this my student financial aid information for the student financial aid information fina
I certify that I explicit written 2023-2024 sch  (Student's Signa  Notary's Certificate of Conceptor (Date) personally appoint on basis of sati	ture)  tificate of Acknowledgement  City/C  , before me,  (Printed name of signer)  sfactory evidence of identification	(Print Student's Name of College to release note to the County of	ne) am the individual signing this my student financial aid information for the student financial aid information fina
I certify that I explicit written 2023-2024 sch  (Student's Signa  Notary's Certificate of	ture)  tificate of Acknowledgement City/C  , before me,  (Printed name of signer) sfactory evidence of identification  -named person who signed the for	(Print Student's Name of College to release note to the County of	ne) am the individual signing this my student financial aid information for the student financial aid information fina
I certify that I explicit written 2023-2024 sch  (Student's Signa  Notary's Certificate of Conceptor (Date) personally appoint on basis of sati	ture)  tificate of Acknowledgement City/C  , before me,  (Printed name of signer) sfactory evidence of identification  -named person who signed the for	(Print Student's Name of College to release note to the County of	ne) am the individual signing this my student financial aid information for

Do not mail this worksheet to the U.S. Department of Education. Submit this worksheet to the financial aid administrator at your school. You should make a copy of this worksheet for your records.