

Notarized Identity Verification Form

PRINT NAME: _____
(First Name, Middle Initial, Last Name)

E-mail Address (Required): _____

Address: _____

Phone: _____ City: _____ State: _____ Zip Code: _____

Name and address of School, Library, District, Company or Institution:

I hereby represent that all above information is true and accurate.

Signature: _____

(Sign in the Presence of a Notary)

State of _____ County of _____

I hereby certify that on this _____ day of _____, 20_____

Requirement #1

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 following form of identification as proof of his or her identity and place of employment:

- Driver's License or Govt. Identification Card
- U.S. Passport
- U.S. Military ID Card
- State Identification Card
- Social Security Card
- Birth Certificate
- Other: _____
(provide description)

Requirement #2

Employment:

- Employment ID/Badge
- Paystub
- Other: _____

_ To be completed by notary _____

Notary Public:

(Print Name)

My Commission Expires:

Notary Public Signature:



Reserved for Notary Seal