

Statement of Identity and Educational Purpose

Student ID Number		
Student Name:	Phone Number:	
Form must be completed in blue or black ink. Failure delay of processing or change of financial aid eligibili Read instructions carefully before completing.		
Section 1: Identity		
MUST BE COMPLETED & SIGNED A	AT THE FINANCIAL AID OFFICE	
You must appear inperson at	Financial Aid Office to verify your	
(Name of i identity by presenting a valid unexpired government-i limited to, a driver's license, other state-issued ID, or paphoto ID.	ssued photo identification (ID), such as, but not	
Type of documentation submitted:		
Designated institutional official:		

(School official's printed name)

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Student ID Number: **S**

Section 2: Statement of Educational Purpose MUST BE COMPLETED & SIGNED AT THE FINANCIAL AID OFFICE

In addition, you must sign, in the presence of the institutional official, the following:

I certify that I		am the individual signing this
(Studer	nt's printed name)	and the markidual signing this
	rpose and that the federal stud	
	d for educational purposes and	
•	·	for 2024-2025.
	(Name of institution)	
Student Signature:		Date:
	Notary Section Instruct	ions: Please Read
This section should only be complete	ted if you are unable to appear	in person at the institution with a designated
official. This form (the original on w	hich the seal is visible) should b	e mailed to the Financial Aid Office at your
institution along with the copy of th	ne government-issued identificat	tion.
Additional Notes: Department of Ed	ducation does not recognize onl	ine notaries.
Notary must mak	e a copy of your ID and note "tr	ue and exact copy made from original.
		•
	Notary's Certificate of Ackno	owledgment
State of	City/County	
On	of , before me	
(Date)	·	(Notary's name)
Personally appeared		and proved to me on the basis of
	(Printed name of signer)	
Satisfactory evidence of Identification		to be the above-named
(Type of unexpired government)		
	My commission expires on _	, 20
Notary(Print):		
Notary (Signature):		(Seal)