

2024–2025 Verification

Identity / Statement of Educational Purposes

Instructions to complete this form

Students must complete sections A, B, and C and have the option on sections D and E as follows:

- Section D (may be completed by your campus official) - print this form, take proof of identity to your campus and have the campus complete section D; or
- Section E (if you are unable to get to the campus for completion of section D) - print this form, take proof of identity to a Notary and have the notary complete section E.

Note: Student must provide the school with this original, signed, and notarized form **and** a copy of the photo ID you presented to the Notary Public.

Once you have satisfied sections A, B, C and selected section D, you must have your Financial Aid Officer scan or fax into your electronic file. If you selected section E, see “**Note**” above.

A. Student’s Information (please print)

 Student’s Last Name Student’s First Name Student’s M.I. Student’s SSN (Last 4-digits)

 Student’s Street Address (include apt. no.) Student’s Email Address

 City State Zip Code

 Student’s Home Phone Number (include area code) Student’s Alternate or Cell Phone Number

B. Identity / Statement of Educational Purposes

A student must appear in person and present the following documentation to an institutionally authorized individual to verify the student’s identity. If a student is unable to appear in person (ex: Online student), he or she must provide a copy of the following documents:

- An unexpired valid government-issued photo identification, such as but not limited to:
 - Driver’s license;
 - State issued identification (Non-driver’s license);
 - Passport

Student's Name: _____

SSN (Last 4-digits): _____

C. Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement of

(Print Student's Name)

Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending _____

(Name of Postsecondary Educational Institution) for 2024-2025.

Student's Signature_____
Date_____
Student's ID Number**D. (School Use) Verification and Signature**

My signature below certifies that I am an authorized representative of this school and that I have personally reviewed the identification document(s) submitted by the student.

Note: A copy of the student's unexpired valid government issued ID(s) has been made and placed in the student's file.

Identification documents were presented by the student to me on this date: ____/____/____

Authorized School Official's Printed Name_____
Title_____
Signature**E. Notary's Certificate of Acknowledgement**

State of _____

City/County of _____

On _____, before me, _____,

(Date)

(Notary's Name)

personally appeared _____, and proved to me on the basis of

(Student's Printed Name)

satisfactory evidence of identification _____ to be the

(Type of government-issued photo ID provided)

above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

(Seal)

(Notary Signature)

My commission expires on _____

Note: Please remember that if you choose to have this form notarized you will need to mail this original form to your Financial Aid Office. Include a copy of the photo ID you presented to the Notary Public.