

Date ReceivedDate Scanned

**2024-2025 IDENTITY AND STATEMENT
OF EDUCATIONAL PURPOSE
TO BE SIGNED AT THE COLLEGE**

Your 2024-2025 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information the financial aid administrator at your school will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your school may ask for additional information.

A. Student's Information:

Student's Last Name

Student's First Name

Student's M.I.

Student ID Number

Student's Street Address (include apt. no.)

Student's Date of Birth

City

State

Zip Code

Student's Email Address

Student's Home Phone Number (include area code)

Student's Alternate or Cell Phone Number

VERIFICATION OF IDENTITY

The student is required to provide proof of Identity to _____
(Name of Postsecondary Education Institution)

The student must appear in person at said institution to verify his or her identity by presenting a valid **government-issued photo identification** (ID) such as, but not limited to: 1) Driver's License; 2) State-issued ID; 3) Passport; or 4) other such documentation.

The institution will maintain a copy of the student's photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect the student's ID.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose on the back of this form (first box). If you are unable to sign at the institution, you may take this form to a Notary to complete and sign in front of them.

STATEMENT OF EDUCATIONAL PURPOSE

I certify that I _____ am the individual signing this
(Print Student's Name)

"Statement of 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:

_____ for 2024-2025.

(Name of Postsecondary Educational Institution)

Signed: _____
Student

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Date: _____

Received Date: _____

Employee Name: _____ Employee Signature _____

IF YOU ARE UNABLE TO SIGN THIS AT THE INSTITUTION, YOU MUST USE THE FORM ON THE BACK OF THIS DOCUMENT AND SIGN IN FRONT OF THE NOTARY PUBLIC. COMPLETED DOCUMENT AND COPY OF VALID ID MUST BE SUBMITTED TO THE SCHOOL

**2024-2025 IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE
(To Be Signed With Notary)**

Your 2024-2025 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information the financial aid administrator at your school will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete this form and sign in front of the Notary Public. **You must also provide a copy of a valid government-issued photo identification (ID) such as but not limited to: 1) Driver's License, 2) State-issued ID, 3) Passport, or 4) other such documentation.**

Student's Information:

Student's Last Name	Student's First Name	Student's M.I.	Student ID Number
Student's Street Address (include apt. no.)			Student's Date of Birth
City	State	Zip Code	Student's Email Address
Student's Home Phone Number (include area code)			Student's Alternate or Cell Phone Number

Statement of Educational Purpose

I certify that I _____ am the individual signing this
(Print Student's Name)

Statement of 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:

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

Signed: _____ Date _____
Student

Student's SSN: _____

Notary's Certificate of Acknowledgement

State of _____ City/County of _____

on _____, before me, _____
(Date) (Notary's name)

personally appeared, _____, and provided to me
(Printed name of signer)

on basis of satisfactory evidence of identification _____
(Type of government-issued photo ID provided)

to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal
(seal)

(Notary signature)

My commission expires on _____
(Date)