

Office of Financial Aid and Scholarships Identity and Statement of Educational Purpose Worksheet 2020-2021

A. STUDENT INFORMATION (please print)

Name:	Student ID #: Phone Number:	
Address:		
City:	State:	Zip Code:
B. IDENTITY		
You must appear in person to the Office of Financial Aid and dentification to verify your identity, including, but not limited. • Driver's license • State-issued identification • Passport	· · · · · · · · · · · · · · · · · · ·	valid, government-issued, unexpired
f you are unable to appear in person at Anderson University ake this worksheet and proof of identity to a notary public t		nd Scholarships to verify your identity,
C. SCHOOL CERTIFICATION – for school use		
I certify that I,	, am an authorized re	presentative of Anderson University and
I have personally reviewed the identification document(s) s	submitted by the above na	med student. A copy of the his/her
valid, government-issued, unexpired identification has bee	n attached.	
Identification documents were presented to me by the students	dent on this date:	.
Authorized Official's Name		
 Date		

D. NOTARY CERTIFICATION

If you are unable to appear in person at Anderson University's Office of Financial Aid and Scholarships to verify your identity, you must provide to the institution:

- **a.** A copy of your valid, government-issued, unexpired identification that is acknowledged in the notary statement below, such as, but not limited to:
 - Driver's license
 - State-issued identification
 - Passport; and
- **b.** This original worksheet (copies are not permitted), which must be notarized (Section F).



Stamp / Seal

E. STATEMENT OF EDUCATIONAL PURPOSE

Note: Do not complete this section until you are in t	he presence of the University Official or Notary Public.	
I certify that I,	, am the individual signing this Statement of Educational	
Purpose and that the Federal student financial assis	tance I may receive will only be used for educational purposes and to	
pay the cost of attending Anderson University for 20	020-2021.	
Signature	Student ID	
Date		
F. NOTARY ACKNOWLEDGEMENT		
State of	<u> </u>	
County of		
On, 20		
(Date)	(Name of notary public)	
personally appeared(Student's na	, who proved to me on the basis of me – printed)	
	to be the above named pe of government-issued photo ID provided)	
person who signed this statement.		
Signature of Notary Public		
Name of Notary Public (stamped or printed)		
Commission Expiration		