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|-------|------------|--|
| Ala | Year | |



Identity and Statement of Educational Purpose (To Be Signed With Notary)

| | (10 20 0.8 | Jul 1110101 110101 117 |
|-----------------------------------|----------------------------|--|
| If the student is unable to a | ppear in person at | |
| to verify his or her identity, | | Postsecondary Educational Institution) |
| | | tification (ID) that is acknowledged in the notary statement , other state-issued ID, or passport; and |
| (b) The original notarized St | atement of Educational Pur | rpose provided below. |
| | | |
| | Statement of Edi | ucational Purpose |
| I certify that I | (Print Student's Nam | am the individual signing this |
| I may receive w | ill only be used for educa | hat the federal student financial assistance ational purposes and to pay the cost of |
| attending | | · |
| | | |
| (Student's Signa | ature) | (Date) |
| | | |
| (Student's ID No | umber) | |
| State of | - | te of Acknowledgement |
| City/County of | | |
| On | hefore me | |
| (Date) | _, before me, | (Notary's name) |
| i i | | , and provided to me |
| | (Printed name of signe | |
| on basis of satisfactory evid | ence of identification | |
| | (Туре | e of government-issued photo ID provided) |
| to be the above-named per | son who signed the foregoi | ng instrument. |
| WITNESS my hand and office (seal) | cial seal | |
| | | (Notary signature) |
| My commission expires on | | <u> </u> |
| | (Date) | |
| | l receiving documents M | T BE COMPLETED AT TIME OF RECEIPT NUST indicate <u>date of receipt</u> and <u>his/her name</u> on ALL n support of this statement. |
| Date of Receipt of Documer | ntation | Name of Official Receiving Documentation |
| | - | |