



"Excellence in Healthcare Education"

2020-21 Identity and Statement of Educational Purpose

Print Student's Name

You must verify your identity and sign a Statement of Educational Purpose. You must complete this in person at the Financial Aid office only.

Identity and Statement of Educational Purpose (To Be Signed at the Institution)

The student must appear in person at _____
(Name of Institution)

to verify his or her identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

Statement of Educational Purpose

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

individual signing this 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 the 2020-2021 year.
(Postsecondary Educational Institution)

Student Signature

Date

SS#