VERIFICATION OF IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

Name ____________________________ Student ID ____________________________

Email ____________________________ Phone ____________________________

STOP!

This document must be signed in person with photo identification at the Financial Aid Office OR notarized by a commissioned notary public.

I certify that I, ____________________________, am the 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 the University of Alaska Fairbanks for 2015-2016.

Student Signature ____________________________ Date ________________

The UAF Financial Aid Office has:

☐ Confirmed the student’s identity and attached a copy of student’s photo identification (if not notarized).
☐ Confirmed student’s high school graduation status.

FAO Signature ____________________________ Date ________________

Printed Name ____________________________ Title ____________________________

If not signed in person at the Financial Aid Office, this document must be notarized by a commissioned notary public. Use the space below for the notary certificate and seal. Please attach a photocopy of your government issued photo identification.