

Financial Aid and Scholarship services Identity Verification and Statement of Educational Purpose

Academic year

2022-2023

Student information

Please type or print clearly using only blue or black ink.

Last name	First name		Middle initial	10-digit ASU ID
Local street address	City	State	Zip code	Daytime phone number

This form will not be processed if any items are left blank or illegible.

If clarification of your situation is necessary, additional information or documentation may be required.

Purpose

To confirm your identity and certify that the federal student aid you receive will be used only for educational purposes.

Instructions for in-person submission

- 1. Visit any ASU Financial Aid and Scholarship Services location with your unexpired valid government-issued photo ID (examples listed below).
- 2. Complete this form in the presence of ASU Financial Aid and Scholarship Services staff.
- 3. ASU staff will make a copy of your photo ID and upload it to your financial aid file.

Instructions for mail submission

- 1. Bring this blank form, a copy of an unexpired valid government-issued photo ID (examples listed below) and your original photo ID to a notary.
- 2. Complete this form in the presence of the notary.
- 3. The notary will complete Section C.
- 4. Mail this form AND a copy of your photo ID to ASU Financial Aid and Scholarship Services, PO Box 870412, Tempe, AZ 85287-0412.

Section A: Valid government-issued photo ID

Examples of an acceptable unexpired valid government-issued photo ID include but is not limited to:

- Driver's license.
- Other state-issued identification card.
- Passport.

If submitting this form by mail, you must attach a copy of your unexpired valid government-issued photo ID to this form.

Section B: Statement of educational purpose

Only complete this section in the presence of a notary If any portion of this section is left blank, it will be con		aff.
I certify that I	ederal student financial assistance I may receive will	(print your full name) am the individual signing only be used for educational purposes and to pay
Signature	Date	Student ID Number

For FASS	Office	use	on	ly
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Received by (print name):	FASS staff signature:	Date form was received:

Last Name	First Name	Middle initial	10-Digit ASU ID
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Section C: Notary's certification of knowledge

State of	
City/County of	
on	before me,,
(Date)	(Notary's Name)
personally appeared,(Printed name of sign	ner) , and proved to me
on the basis of satisfactory evidence of identific	cation(Type of unexpired government-issued photo ID provided)
to be the above-named person who signed the	
WITNESS my hand and official seal	
(seal)	(Notary signature)
My commission expires on(Date	
Note: If the notary statement appears on a sep of Educational Purpose was the document notation	parate page from the Statement of Educational Purpose, there must be a clear indication that the Statement arized and includes the type of ID used to verify your identity.

If you need assistance to complete this form, please contact our office at 855-278-5080 or students.asu.edu/contact/financialaid.