Financial Aid and Scholarship Services
Identity Verification and Statement of Educational Purpose – In Person

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

<table>
<thead>
<tr>
<th>Last name</th>
<th>First name</th>
<th>Middle initial</th>
<th>10-digit ASU ID</th>
</tr>
</thead>
</table>

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

If clarification of your situation is necessary or a correction was made on the form without an initial accompanying the correction, 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.

Section A: Valid government-issued photo ID
Examples of an acceptable unexpired valid government-issued photo ID include but are not limited to:
- Driver’s license
- Other state-issued identification card (excluding military ID)
- Passport

Section B: Statement of educational purpose
Only complete this section in the presence of ASU Financial Aid and Scholarship Services staff.
If any portion of this section is left blank, it will be considered incomplete.

I certify that I ______________________________________________________________________
(print student’s name)
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 Arizona State University for 2024–2025.

_____________________________________________________________________________________________
Student’s Signature Date Student’s ID Number

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