



2020-2021 VERIFICATION IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

STUDENT INFORMATION

First Name M.I. Last Name

_____ () - _____

OR _____

Student ID Last 4 Digits of SSN Phone Number FC20ISEP

TO BE SIGNED WITH NOTARY

If the student is unable to appear in person at **Indiana Wesleyan University** to verify his or her identity, the student must provide:

- (a) A copy of the **unexpired** valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as, but not limited to, a driver's license, other state-issued ID, or passport; and
- (b) The original Statement of Educational Purpose provided below, **which must be notarized**.

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 **Indiana Wesleyan University** for 2020-2021.

 Student's Signature Date

Notary's Certificate of Acknowledgement

State of _____

City/County of _____

On _____, before me, _____,
Date Notary's Name

personally appeared, _____, and proved to me
Printed Name of Signer

on basis of satisfactory evidence of identification _____
Type of Government-issued Photo ID Provided

to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

Seal

Notary Signature

My commission expires on _____
Date

MAIL this completed form AND a copy of the **unexpired** valid government-issued photo identification to the financial aid office using the contact information listed below. **Faxed or scanned/emailed forms are unacceptable.**