IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE WORKSHEET

Only Complete Section A or B. Complete Section A at Armstrong or Section B with a Notary

_______________________________________________________________                       907
Print Student’s Name (Last, First, MI)                           Armstrong Student ID#

A. IDENTIFY AND STATEMENT OF EDUCATIONAL PURPOSE (To Be Signed at the Institution)

The student must appear in person at the Office of Financial at Armstrong State University to verify his or her identity by presenting a 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 the name of the official at the institution authorized to collect the student’s ID.

In addition, the student must sign, in the presence of the institutional official, the following:

Statement of Educational Purpose

I certify that I ____________________________________________ am the individual signing this
(Print Student Name)

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 Armstrong State University for 2017–2018.

_________________________________________        ______________
Student Signature                          Date

Office Use Only:

_________________________________________        ______________
Signature                          Date

Name of Authorized Financial Aid Representative who accepted proof of Student Identity and witnessed the student sign this form.

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Revised 3/2/2015
IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE WORKSHEET

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_______________________________________________________________ 907
Print Student's Name (Last, First, MI)                     Armstrong Student ID#

B. IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE (To Be Signed with Notary)

If the student is unable to appear in person at Office of Financial Aid at Armstrong State University to verify his or her identity, the student must provide:
(a) A copy of the 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 notarized Statement of Educational Purpose provided below.

Statement of Educational Purpose

I certify that I, ____________________________________________, am the individual signing this (Print Student Name)
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 Armstrong State University for 2017-2018.

_________________________________________ ______________
Student Signature                                         Date

Notary’s Certificate of Acknowledgement

State of ______________________________________________________________________
City/County of ________________________________________________________________
On____________________, before me, ____________________________________________, (Date)
personally appeared, ____________________________________________, and provided 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)

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Revised 3/2/2015