

Bluffton University Financial Aid Verification

IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

Student must complete both A and B:

- A. The student must sign, in the presence of a Bluffton University Financial Aid Officer, this Statement of Educational Purpose:

Name: _____ Student ID#: _____

Email: _____ Phone: _____

I certify that I, _____ am the individual signing
(Print Student's Name)

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 Bluffton University for the 2023-2024 academic year.

Student's Signature

Date

- B. The student must appear in person at Bluffton University to verify his or her identity by presenting an unexpired valid government-issued photo identification such as, but not limited to, a driver's license, other state-issued ID, or passport. Bluffton University will maintain a copy of the student's photo ID that is annotated with the date it was received and reviewed, and the name of the official at Bluffton University authorized to receive and review the student's ID.

If the student is unable to appear in person at Bluffton University to verify his or her identity, the student must complete and have notarized the following Certificate of Acknowledgement and return with a photocopy of the unexpired valid government-issued photo identification (ID) document acknowledged in the notary statement below.

NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT (only needed if not able to appear in person at the Financial Aid Office)
State of _____ City/County of _____ on (date) _____
before me (Notary's name) _____, personally
appeared, (printed name of signer) _____, and provided to me
on the basis of satisfactory evidence of identification (type of government-issued photo ID)
_____ to be the above-named person.

WITNESS my hand and official seal

(seal)

Notary Signature

FOR OFFICE USE ONLY (attach photocopy of ID after verifying identity)

Document used _____ Date Received _____

Authorized FA Officer signature _____