



# 2017- 2018 Identity and Statement of Educational Purpose

This form may be submitted via email,  
mail, fax, or in person

Office of Financial Aid  
1950 Third Street  
La Verne, CA 91750

Phone: (800) 649-0160  
Fax: (909) 448-1629  
[finaid@laverne.edu](mailto:finaid@laverne.edu)

## STUDENT INFORMATION

\_\_\_\_\_

Last Name

First Name

La Verne ID or SSN

## TO BE SIGNED AT THE INSTITUTION

The student must appear in person at the University of La Verne’s Office of Financial Aid 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 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’s 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 **University of La Verne** for 2017-2018.

\_\_\_\_\_  
(Student’s Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Student’s ID Number)

**If you are unable to appear in person at the University of La Verne Office of Financial Aid, please read page 2 of this form.**

## OFFICE USE ONLY

Valid Government Photo ID Reviewed and Received by: \_\_\_\_\_  
Employee Signature

Original ID Provided and Form Signed – In Person: \_\_\_\_\_  
Employee Initials

Employee Name (Printed): \_\_\_\_\_

Employee Title: \_\_\_\_\_

Date (mm/dd/yy): \_\_\_\_\_



# 2017-2018 Identity and Statement of Educational Purpose

La Verne ID #: \_\_\_\_\_

## TO BE SIGNED WITH A NOTARY

If the student is unable to appear in person at the University of La Verne’s Office of Financial Aid 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’s 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 University of La Verne for 2017-2018.

\_\_\_\_\_  
 (Student’s Signature) (Date) (Student’s ID Number)

### Notary’s Certificate of Acknowledgement

State of \_\_\_\_\_

City/County of \_\_\_\_\_

On \_\_\_\_\_, before me, \_\_\_\_\_,  
 (Date) (Notary’s name)

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)

**You can submit page 2 of this form along with the requested ID via fax, email, mail, or in person.**