2015-16 Identity/Educational Purpose Worksheet
(V4, V5)

SECTION 1: IDENTITY (Complete Item A or B)

A. Completed in person at Anderson University:

The valid government issued documentation attached was presented in person and reviewed by the staff member below.

I certify that the attached copy is a true and accurate representation of the student’s government issued identification.

_______________________________________________________
FA Counselor Signature

Date Document Received

OR

B. Completed if the student is NOT able to appear in person at Anderson University:

The student must provide the following documentation with notarized signature:

• 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

NOTARY’S CERTIFICATE OF ACKNOWLEDGEMENT

State of ______________________________ City/County of ______________________________ on _______________________.

before me, ______________________________, personally appeared ______________________________, and provided to me on
(Date)
(Notary’s name) (Printed name of signer)

basis of satisfactory evidence of identification ______________________________ to be the above-named person who
(Type of government-issued photo ID provided)
signed the foregoing instrument.

WITNESS my hand and official seal
(seal)

______________________________________________
(Notary signature)

My commission expires on _______________________
(Date)
SECTION 2: EDUCATIONAL PURPOSE STATEMENT (Required for all)

I certify that 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 ________________________________ for 2015-2016.

(Name of Postsecondary Educational Institution)

__________________________    ______________
(Student’s Signature)          (Date)

__________________________
(Student’s ID Number)

SECTION 3: STUDENT SIGNATURE (Required for all)

By signing this worksheet, we certify that all of the information reported is complete and correct. We also acknowledge that we have read and agree to comply with all verification policies as stated by the University. **Failure to submit information in a timely fashion may result in the application being filed as inactive** with no further consideration and no federal aid for the academic year. Student and one parent must sign:

__________________________    ______________
Student                      Date

**WARNING:** If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.