2017-18 Verification of Identity & Statement of Educational Purpose

<table>
<thead>
<tr>
<th>Student’s First Name</th>
<th>9-digit WSU Student ID #</th>
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<tr>
<th>Student’s Last Name</th>
<th>Phone Number</th>
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If you do not complete the verification process, you are not eligible for federal student aid.

You must appear in person and sign this form in the presence of a financial aid office authorized representative.

You must show unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver’s license, other state-issued ID, or passport.

Statement of Educational Purpose

I certify that I __________________________ am the individual signing this Statement of Educational Purpose (Print Your Name) and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Wayne State University for 2017-2018.

<table>
<thead>
<tr>
<th>Student’s Signature - SIGN ONLY IN THE PRESENCE OF AN AUTHORIZED OFFICIAL or NOTARY</th>
<th>Date</th>
<th>Student’s ID Number</th>
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You must sign this form in the presence of an official

FOR OFFICE USE ONLY:

Signature of WSU official authorized to receive this form Name Date

☐ I have annotated the copy of student’s photo ID with my name and the date received.

If you cannot appear in person, you must sign this form in the presence of a notary public AND submit this notarized form along with a copy of the government-issued photo ID that you showed the notary public.

Notary’s Certificate of Acknowledgement

State of ___________________________ City/County of ___________________________

On ___________________________, before me, ____________________________________,

Personally appeared, ___________________________, and provided to me 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 (if required)

(Notary signature)

My commission expires on ___________________________

(Date)

Print your name and student ID number on all documents – We cannot accept a FAX. Return this original form to:

OFFICE OF STUDENT FINANCIAL AID • The Welcome Center • P. O. Box 2340 • 42 West Warren • Detroit, MI 48202-0340