2020-21 Verification of Identity & Statement of Educational Purpose

Student’s First Name

9-digit WSU Student ID #

Student’s Last Name

Phone Number

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 verify your identity by presenting an 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 2020-2021.

___________________________________________________________________________                         ____________________
Student’s Signature - SIGN ONLY IN THE PRESENCE OF AN AUTHORIZED OFFICIAL or NOTARY          Date                          Student’s ID Number

You must sign this form in the presence of an official

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, ___________________________

(Date) (Notary’s name)

personally appeared, ____________________________, and provided to me on basis of satisfactory

(Printed name of signer)

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 ___________________________

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