VERIFICATION OF IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

Name ___________________________________________  Student ID ________________________________

Email ___________________________________________  Phone ________________________________

STOP!

This document must be signed in person with photo identification at the Financial Aid Office OR notarized by a commissioned notary public.

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 the University of Alaska Fairbanks for 2020-2021.

Student Signature ___________________________  Date ___________________________

The UAF Financial Aid Office has:
  □ Confirmed the student’s identity and attached a copy of student’s photo identification (if not notarized).
  □ Confirmed student’s high school graduation status.

FAO Signature ___________________________  Date ___________________________

Printed Name ___________________________  Title ___________________________

If not signed in person at the Financial Aid Office, this document must be notarized by a commissioned notary public. Use the space below or attach an additional page for the notary certificate and seal. Please attach a photocopy of your government issued photo identification.