

## STATEMENT OF IDENTITY AND EDUCATIONAL PURPOSE

## **PURPOSE**

This form is intended to collect information required for this student's 2022-2023 financial aid application and must be completed by authorized Student Financial Aid Services (SFAS) staff; other authorized UConn staff, or a Notary Public.

## **INSTRUCTIONS**

- Review the original unexpired photo identification presented by the student.
- Complete Sections 1-4. Original signatures on form required.
- Copy the original documentation for SFAS records (front and back).
- Sign and mail the completed original form, with copies of documentation, to the address at the top of this form. DO NOT FAX or EMAIL.

University of Connecticut Student Financial Aid Services 233 Glenbrook Road Unit 4116 Storrs, CT 06269-4116

Phone: (860) 486-2819
E-mail: financialaid@uconn.edu
Website: https://financialaid.uconn.edu/

SECTION 1: Student Information					
Last Name		irst Name		MI	
Student ID					
SECTION 2: Student's Statement of Educational Purpose					
I certify that I am the individual signing this Statement of Educational Purpose and (Print Student's Name) 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 Connecticut for 2022-2023.					
Student's Signature			Date		
SECTION 3: Proof of Identity: Original, Unexpired Government-Issued Photo Identification (check & verify one below)					
□ US Passport/Passport Card	Document #:			Expiration Date:	
□ Driver's License	Document #:		State Issued:	Expiration Date:	
□ State ID (not license)	Document #:		State Issued:	Expiration Date:	
□ Military ID	Document #:		Branch:	Expiration Date:	
<ul><li>Other Government- Issued Photo Identification</li></ul>	Document #:		ID Type & Issuer:	Expiration Date:	
SECTION 4a: If Certified by Authorized UConn Staff  SECTION 4b: If Certified by Notary Public					
I certify that I have reviewed the original document specified in Section 3, and certify that to the best of my knowledge, it appears to be valid proof of this student's identity. In addition, I have witnessed this student's signature above certifying his/her Statement of Educational Purpose.		my Secont's appoint's appoint of students	I certify that I have reviewed the original document specified in Section 3, and certify that to the best of my knowledge, it appears to be valid proof of the identity of the person appearing before me. In addition, I have witnessed this student's signature above certifying his/her Statement of Educational Purpose.		
UConn Staff Name and Title (print clearly)		Not	Notary's Name (print clearly)  Stamp & Seal here		
Staff Member's Signature	Date	No	tary's Signature		
		Sign	nature Date Date	of Commission Expiration	