

Office of Financial Aid

(Notary signature)

(Date)

Date

1200 Murchison Road, Fayetteville, NC 28301 | Ph: (910) 672-1325 | Fax: (910) 672-1423 | www.uncfsu.edu/finaid

2019/2020 Identity and Statement of Educational Purpose

Student Name (Last, 1	First, MI)	Banner ID
appear in person at Fayetteville State	University and provide the oto identification (ID), su	ch as a driver's license, other state-issued ID, or passport.
STA	TEMENT OF EDUCA	ATIONAL PURPOSE
I certify that I (Print Student's First and	am the indivi	dual signing this Statement of Educational Purpose , in
the presence of	nay receive will only be u	e State University institutional official, and that the sed for educational purposes and to pay the cost of year.
Student Signatur	re	Date
This original signed and	notarized Statement of nt-issued photo ID as re	Educational Purpose. eferenced in the Notary's Certificate of
NOTARY ²	'S CERTIFICATE OF	ACKNOWLEDGEMENT
STATE OF	CITY/C0	DUNTY OF
	e me,	, personally appeared,
(Date)	(N	otary's name)
(Printed name of signer)	, and provide	d to me on basis of satisfactory evidence of identification
(Type of government-issued photo ID		ove-named person who signed the foregoing instrument.
WITNESS my hand and official seal (Official Seal)		

OFFICE USE ONLY:

My commission expires on _

Fayetteville State University Authorized Official

Internal Use Only V4/V5 IDEP