University of Illinois Springfield - Office of Financial Assistance

One University Plaza, MS UHB 1015 -- Springfield, Illinois 62703-5407 -- Phone: (217) 206-6724 https://www.uis.edu/cost-aid/financial-aid

2023-2024 Identity and Statement of Educational Purpose

The student must appear in person at <u>The Office of Financial Assistance</u>, <u>University of Illinois at Springfield</u> to verify his or her 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. The institution will maintain a copy of the student's photo ID that is annotated with the date it was received by the institution and the name of the official at the institution authorized to receive and review the student's ID. In addition, the student must sign the Statement of Educational Purpose provided below:

Statement of Educational Purpose							
I certify that I(Print Student's Name that the federal student financial assistant of attending University of Illinois at Spring	am the individual signing this Statement of Educational Purpose and) te I may receive will only be used for educational purposes and to pay the cost field for 2023-2024.						
Student Signature	Date						
For Office Use Only Staff Date: Documentation provided Milita ENTER YOUR 9-DIGIT UIN .	ry ID Driver's License Other IDPassport						

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2023-2024 Identity and Statement of Educational Purpose (To Be Signed With Notary)

If the student is unable to appear in person at <u>The Office of Financial Assistance</u>, <u>University of Illinois Springfield</u> to verify his or her identity, the student must provide:

- (a) A copy of the unexpired, valid government-issued photo identification (ID) that is acknowledged in the notary statement below or that is presented to a notary, such as but not limited to, a driver's license, other state-issued ID, or passport (Note: a student ID is not a valid form of ID); and
- (b) The original notarized Statement of Educational Purpose provided below.

	Statement of Edu	ıcational Purpo	se				
I certify that I	certify that I am the individual signing this Statement of Educational Purpose and that the federal (Print Student's Name)						
student financial assistance I may recat Springfield for 2023-2024.							
Student Signature		Date					
N	otary's Certificate of	Acknowledgem	nent				
State of							
City/County of							
On, before n (Date)	ne,(Notar	v's name)	,				
	•	, and provided to me on basis of satisfactory evidence of					
	ed name of signer)	, and provided	to file off basis o	i satisfactory evidence of			
identification	.	the above-named per	son who signed	the foregoing instrument.			
(Type of government-iss		·	J	0 0			
(seal)		WITNESS my har	nd and official s	eal			
		(Notary	signature)				
	Му со	ommission expires on	(Date)				
ENTER YOUR 9-DIGIT UIN :-	→						
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