

NAME \_\_\_\_\_

ID NUMBER \_\_\_\_\_

IDENTITY

The student must appear in person at Andrews University 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, non-driver's identification card, other state-issued ID, or passport. The institution will maintain an annotated copy of the unexpired valid government-issued student's photo ID which includes the date it was received and the name of the official at the institution authorized to collect the student's ID. In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose.

If the student is unable to appear in person at Andrews University to verify his or her identity, the student must provide a copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to a driver's license, non-driver's identification card, other state-issued ID, or passport; and the original notarized Statement of Educational Purpose provided below. To be signed only in presence of Notary.

STATEMENT of EDUCATIONAL PURPOSE > Student must sign in the presence of an SFS Official or Notary.

I certify that I, \_\_\_\_\_, am the individual signing this Statement of Educational Purpose  
(print student's 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 Andrews University for 2024-2025.

Student's signature \_\_\_\_\_

Date \_\_\_\_\_

SFS staff signature \_\_\_\_\_

Date \_\_\_\_\_

SFS printed name \_\_\_\_\_

Type of ID \_\_\_\_\_

Photo ID verified and copied.

NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT

State of \_\_\_\_\_ City/County of \_\_\_\_\_

On \_\_\_\_\_, before me, \_\_\_\_\_, personally appeared,  
(date) (notary's name)

\_\_\_\_\_, and proved to me on basis of satisfactory evidence of identification  
(printed name of signer)

\_\_\_\_\_ to be the above-named person who signed the foregoing instrument.  
(Type of unexpired valid government-issued photo ID provided)

WITNESS my hand and official seal: \_\_\_\_\_ My commission expires on \_\_\_\_\_  
(notary signature) (date)

SEAL



If unable to sign in person at SFS.