

## Suffolk University

• Office of Student Financial Services • 73 Tremont Street • Boston, MA 02108  
617-573-8470

### 2018 – 2019 Certification of Identity and Statement of Educational Purpose

*Student must select and follow instructions for one of the following two options below. Depending on which option is selected, this form must be signed in the presence of a Suffolk University Office of Student Financial Services Administrator (option 1) or a Notary Public (option 2). Do not complete the form in advance!*

#### ❖ \_\_\_\_\_ Option 1:

The student must appear in person at **Suffolk University** to verify his or her identity by presenting a 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 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 following Statement of Educational Purpose:*

- > I certify that I \_\_\_\_\_ am the individual signing this Statement of Educational Purpose  
(Print Student's Name)  
and the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending **Suffolk University** for 2018-2019.

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

\_\_\_\_\_  
*Student's ID number*

\_\_\_\_\_  
*Date*

*Original student signature viewed by financial aid administrator \_\_\_\_\_/date \_\_\_\_\_*

#### ❖ \_\_\_\_\_ Option 2:

If the student is unable to appear in person at Suffolk University to verify his or her identity, the student must submit to The Office of Student Financial Services the following documentation:

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

*The student must sign, in the presence of a Notary, the following Statement of Educational Purpose:*

- > I certify that I \_\_\_\_\_ am the individual signing this Statement of Educational Purpose  
(Print Student's Name)  
and the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending **Suffolk University** for 2018-2019.

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

\_\_\_\_\_  
*Student's ID number*

\_\_\_\_\_  
*Date*

#### *Notary's Certificate of Acknowledgement*

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

On \_\_\_\_\_, before me, \_\_\_\_\_,  
(Date) (Notary's name)

personally appeared, \_\_\_\_\_, and provided to me  
(Printed name of signer)

on basis of satisfactory evidence of identification \_\_\_\_\_  
(Type of government-issued photo ID provided)

to be the above-named person who signed the foregoing instrument.

**WITNESS my hand and official seal**

(seal)

\_\_\_\_\_  
(Notary signature)

My commission expires on \_\_\_\_\_ (Date)

***Do not fax this form. Please present this form in person or mail\* to address above  
(\*student may only mail this form if option 2 is selected.)***