



Division of Student Affairs  
Office of Financial Aid

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## 2023-2024 Identity/Statement of Educational Purpose

This form is to be completed in the Office of Financial Aid at Florida A&M University with a financial aid professional. The student must provide valid government-issued photo identification. This includes: a driver’s license, 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.

**Additionally, students must sign, in the presence of the University representative in the Office of Financial Aid, the Statement of Educational Purpose below:**

I certify that I, \_\_\_\_\_ and the individual signing this **State of Educational Purpose** and that the federal student financial assistance I may receive will only be used for educational purposes to pay the cost of attending **Florida A&M University** for the 2022-2023 award year.

**I am providing one of the following documentation:**

- Driver’s License
- Military ID
- Other ID
- Passport

\_\_\_\_\_  
Student’s Full Name

\_\_\_\_\_  
FAMU Student ID Number

\_\_\_\_\_  
Student’s Signature

\_\_\_\_\_  
Date

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Student Name \_\_\_\_\_

FAMU Student ID \_\_\_\_\_

### Notary's Certificate of Acknowledgement

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

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

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

satisfactory evidence of identification \_\_\_\_\_ to be  
(Type of government-issued photo ID provided)

the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal  
(seal)

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

My commission expires on \_\_\_\_\_

#### Office Use Only:

\_\_\_\_\_ Mail

\_\_\_\_\_ Email

\_\_\_\_\_ Fax

\_\_\_\_\_ Hand Carry

Received by: \_\_\_\_\_

Date: \_\_\_\_\_