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
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: ____________________________