

Aquinas College Financial Aid Office, Hruby Hall

1700 Fulton St. E, Grand Rapids, MI 49506

Ph: 616.632.2893 • Fx: 616.732.4547 • <u>financialaid@aquinas.edu</u>

2023-2024 Identity and Statement of Educational Purpose

Student Name		ID #	
government-issued photo iden passport . The institution will m	tification (ID), such as, but not li aintain a copy of the student's p	his or her identity by presenting an unexpired valid mited to, a driver's license, other state-issued ID, or hoto ID that is annotated by the institution with the at the institution authorized to receive and review	
In addition, the student must si provided below.	gn, in the presence of the institu	tional official, the Statement of Educational Purpose	
		ust sign this form in the presence of a notary public ent-issued photo ID you showed the notary public.	
(Print Statement of Educational Pu	nt Student's Name) urpose and that the Federal s	, am the individual signing this tudent financial assistance I may receive will t of attending Aquinas College for 2023-2024.	
(Student's Signature)		(Date)	
If applicable:	Notary's Certificate of Acknow	vledgement	
State of	, City/County of		
On, before i	me,		
(Date)	(Notary's name)		
personally appeared,	(Printed name of signer)	, and proved to me	
		pired government-issued photo ID provided)	
	n who signed the foregoing instr		
WITNESS my hand and officia	l seal		
		(Notary signature)	
	My commission expire	s on(Date)	
For office use only:			
This signed Identity and Statement of Educational Purpose was received on (date)			
Form of valid government-issued photo identification received: (date)			
Received by			

Please return ORIGINAL FORM to: Financial Aid Office, Aquinas College, 1700 Fulton St. E, Grand Rapids, MI 49506