



2019-2020 Verification - Identity and Statement of Educational Purpose Form
Dependent/Independent Student

Office of Financial Aid - One University Avenue - Bourbonnais, IL 60914
Phone: (815) 939-5249 Fax: (815) 939-5074 Email: finaid@olivet.edu

ONU ID # or SSN \_\_\_\_\_ Date of Birth \_\_\_\_\_ Phone \_\_\_\_\_

Student Name \_\_\_\_\_
Last First M.I.

Student Address \_\_\_\_\_
Street (include apartment #) City State ZIP Code

Identity and Statement of Educational Purpose
(To Be Signed at the Institution)

The student must appear in person at Olivet Nazarene 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, other state-issued ID, or passport.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

Identity and Statement of Educational Purpose
(To Be Signed in the Presence of a Notary)

If the student is unable to appear in person at Olivet Nazarene University to verify his or her identity, the student must provide to the institution:

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

Statement of Educational Purpose

I certify that I \_\_\_\_\_ am the individual signing this Statement
(Print Student's Name)

of Educational Purpose and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Olivet Nazarene University for 2019-2020.

(Student's Signature)

(Date)

(Student's ONU ID #)

Notary's Certificate of Acknowledgement

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

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

appeared, \_\_\_\_\_, 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 government-issued photo ID provided)

WITNESS my hand and official seal
(seal)

Notary signature \_\_\_\_\_
My commission expires on \_\_\_\_\_

Table with 2 columns and 3 rows: ID Type, Rec'd By, Copy of ID Attached; ID Number, Signature, Date. Header: This section to be completed by Olivet Nazarene University Financial Aid Administrator