Financial Aid Office

1032 West Sheridan Road Sullivan Center Room 190 Chicago, Illinois 60660 Phone: 773.508.7704 UNIVERSITY CHICAGO

Scan completed form and upload to https://forms.luc.edu/faoupload

2025-2026 Identity and Statement of Educational Purpose

<u>The student must appear in person to verify his or her identity</u> by presenting an unexpired valid governmentissued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The student must sign the Statement of Educational Purpose provided below in the presence of a school official.

INSTITUTIONAL USE ONLY

(Printed Name of Institutional Official) (Institutional Official Signature)

(Date ID Reviewed)

<u>If the student is unable to appear in person at the institution to verify his or her identity</u>, the student must provide to the institution's financial aid office:

- 1. 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
- 2. The original Statement of Educational Purpose, which must be signed in the presence of a notary. If the notary acknowledgment appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

Statement of Educational Purpose

		am the individual signing this Statement of		
(Print Student	's Name)			
Educational Purpose and that the	e Federal student finan	cial assistance I ma	y receive will only be used for	
educational purposes and to pay	the cost of attending		for 2025-2026.	
	0	(Print School N		
(Student's Signature)		(Date)	(Student's ID Number)	
Notary's Certifi	cate of Acknowled	lgement (may	vary by State)	
State of	City/County of			
On, before me, (Date)			, personally appeared	
(Date)	(Notary Name)			
	_, and proved to me on	the basis of satisfa	actory evidence of identification	
(Printed name of signer)				
	to be t	he above-named p	person who signed the foregoing	
(Type of unexpired government-issued pl				
instrument.				
WITNESS my hand and official seal			(Seal)	
	(Notary signature)			
My commission expires on				
(Date)				