

Student Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_

Office of Financial Aid Saint Joseph's University Philadelphia, PA

| Identity and Statement of Educational Purpose (to be signed at the institution)  |       |
|--|-------|
| Your Free Application for Federal Student Aid (FAFSA) was selected for verification. We are required to verify your identity. You must also complete a Statement of Educational Purpose.   |       |
| You are required to appear in person at Saint Joseph's University – to verify your identity. This can be done by presenting valid government-issued photo identification (ID), such as but not limited to, a driver's license, other state issued photo identification (ID), or passport.                                      |       |
| The Statement of Educational Purpose below must be signed, in the presence of an institutional official.   |       |
| Statement of Educational Purpose   |       |
| I certify that I am the individual signing this Statement of  (Print Student's Name)  Educational Purpose and that the Federal student financial assistance I may receive will be used only for educational purposes and to pay the cost of attending Saint Joseph's University for (Academic Year).  Student Signature: Date: |       |
| For office Use:  |       |
| Document Received by:  | Date: |
| Include copy of students Photo ID  |       |