

# Identity and Statement of Educational Purpose

The Office of Student Financial Aid at Roger Williams University has been notified that your FAFSA has been selected for verification. Due to this notification, you are required to appear in person at the Office of Student Financial Aid to verify your identity. You will need to provide a valid government-issued photo identification (ID), such as, a driver's license, other state-issued ID, or passport. In addition, the student must sign, in the presence of the institutional official, the following:

## Statement of Educational Purpose

I certify that I \_\_\_\_\_ am the individual signing  
Print Student's Name  
this Statement 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  
\_\_\_\_\_ for 2026-2027.

Name of Postsecondary Educational Institution

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Student's ID Number

\_\_\_\_\_  
Date

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### For office use only

\_\_\_\_\_  
Name of Financial Aid Representative who verified form & ID

\_\_\_\_\_  
Date

☐

Attached copy of government issued ID

☐

Signed and dated copy of government issued ID

# Identity and Statement of Educational Purpose

The Office of Student Financial Aid at Roger Williams University has been notified that your FAFSA has been selected for verification. Due to this notification, you are required to appear in person at the Office of Student Financial Aid to verify your identity. If you are not able to appear in person, the student must complete this form, provide a copy of an unexpired valid government-issued photo identification (ID), such as, a driver's license, other state-issued ID, or passport and submit this original notarized Statement of Educational Purpose to the Office of Student Financial Aid.

## Statement of Educational Purpose

I certify that I \_\_\_\_\_ am the individual signing  
Print Student's Name

this Statement 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

\_\_\_\_\_ for 2026-2027.  
Name of Postsecondary Educational Institution

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Student's ID Number

\_\_\_\_\_  
Date

## Notary's Certificate of Acknowledgement

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

on \_\_\_\_\_, before me, \_\_\_\_\_  
Date Notary's Name

personally appeared \_\_\_\_\_, and proved to me because  
Printed Name of Signer

of satisfactory evidence of identification \_\_\_\_\_  
Type of unexpired government issued photo ID provided  
to be the above-named person who signed the foregoing instrument.

**WITNESS my hand and official seal**  
(Seal)

\_\_\_\_\_  
Notary's Signature

My commission expires on \_\_\_\_\_  
Date