

The Office of Financial Aid and Scholarships
Identity and Statement of Educational Purpose 2023-2024
(To Be Signed with Notary)

_____ ID#: _____
Student Last Name Student First Name MI 6 digits only

If the student is unable to appear in person at Saint Augustine’s University to verify his or her identity, the student must provide:

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

I certify that I _____ am the individual signing this Statement of Educational
(Print Student’s Name)
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 Saint Augustine’s University for 2023-2024.

_____ _____
(Student’s Signature) (Date)

You must submit this original notarized form and attach a copy of your valid government issued photograph identification.

Notary’s Certificate of Acknowledgement

State of _____

City/County of _____

On _____, before me, _____,
(Date) (Notary’s name) personally appeared,

_____, and provided to me on basis
(Printed name of signer)

of satisfactory evidence of identification _____
(Type of government-issued photo ID provided) to
be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal _____
(seal) (Notary signature)

My commission expires on _____
(Date)

(FAXED COPIES ARE NOT ACCEPTED)
Mail completed form to:
The Office of Financial Aid and Scholarships
Saint Augustine’s University
1315 Oakwood Ave
Raleigh, North Carolina 27610
Telephone: 919-516-4000