



Financial Aid and Scholarships

SOUTHEASTERN LOUISIANA UNIVERSITY

2025 – 2026 IDENTITY/STATEMENT OF EDUCATIONAL PURPOSE

Student's Name: _____

W#: _____

Option 1: To be Signed at the Institution

The student must appear in person at **Southeastern Louisiana University** to verify his or her identity by presenting a current valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issue ID, or passport. The institution will maintain a copy of the student's photo ID that is annotated by the institution with the date it was received and reviewed and the name of the official at the institution authorized to collect the student's ID.

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

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 only be used for educational purposes and to pay the cost of attending Southeastern Louisiana University for 2025-2026.

Student's Signature

Date

Financial Aid Counselor's Signature

Date



Financial Aid and Scholarships

SOUTHEASTERN LOUISIANA UNIVERSITY

2025 – 2026 IDENTITY/STATEMENT OF EDUCATIONAL PURPOSE

Student's Name: _____

W#: _____

Option 2: To be Signed in the Presence of a Notary

If the student is unable to appear in person at **Southeastern Louisiana 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. A template "Notary's Certificate of Acknowledgement" can be found below:

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 only be used for educational purposes and to pay the cost of attending **Southeastern Louisiana University** for 2025-2026.

Student's Signature

Date

Notary's Certificate of Acknowledgement

State of _____ City/County of _____

On _____, before me, _____
(Date) (Notary's name)

personally appeared, _____, and proved to me on the basis of satisfactory
(Printed name of signer)

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

the foregoing instrument. WITNESS my hand and official seal _____
(seal)

_____. My commission expires on _____.