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| Financial Aid Office ∙ P.O. Box 6905 ∙ Radford, VA 24142Phone: (540) 831-5408 ∙ Fax: (540) 831-5138 ∙ Text: (540) 328-9360 ∙ finaid@radford.edu<https://www.radford.edu/finaid>  |
| Full Name: |  |  |  |
|  *Last* | *First* | *M.I.* |
|  |  |  |
|  | *Student’s University ID Number*  | *Student’s Date of Birth* |

**Identity and Statement of Educational Purpose**

**(To Be Signed With Notary)**

If the student is unable to appear in person at Radford University to present an unexpired valid photo identification and execute the Statement of Educational Purpose, the applicant must provide:

(a) A copy of an unexpired valid government-issued photo identification such as, but not limited to, a driver’s license, non-driver’s identification card, other State-issued identification, or U.S. passport, that is acknowledged in a notary statement or that is presented to a notary; and

(b) the original notarized Statement of Educational Purpose provided below:

**Statement of Educational Purpose**

 I certify that I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Print Student’s Name) am the individual signing 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 Radford University for 2021-2022.

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| --- | --- | --- |
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Student’s Name Date

Student’s Id Number

**Notary’s Certificate of Acknowledgement**

State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

On\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, before me, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

 (Date) (Notary’s name)

personally appeared, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and provided to me

(Printed name of signer)

on basis 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)