Financial Aid Office
2121 Euclid Avenue, Cleveland, OH 44115
Phone: (216) 687-5411 Fax: (216) 687-9247
For in-person inquiries, please visit Campus411 All-in-1, BH 116
www.csuohio.edu/financial-aid

2019-2020 Identity and Statement of Educational Purpose
(To Be Signed at the Institution)

_____	_____	_____
Last Name	First Name	CSU ID #
(____)_____	(____)_____	
Phone Number (Home)	Phone Number (Cell)	

You are required to appear in person at Cleveland State University, in the offices of Campus 411 All-in-1, to verify your identity. You must present an **unexpired** valid government-issued photo identification (ID) such as, but not limited to, a driver's license, other state-issued ID, or passport. The university will maintain a copy of your photo ID. **No e-mail or faxed documents can be used to satisfy verification requirements for the Statement of Educational Purpose.**

In addition, you **must** sign this form in the presence of the institutional official.

Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement of Educational Purpose and that the
(Print Name)
Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending

Cleveland State University for 2019-2020.

_____	_____	_____
(Student's Signature)	CSU ID Number	(Date)

_____ _____
Institutional Official (Signature) Date

_____
Institutional Official (Print Name)

****Institutional official please remember to sign and date the copy of the valid government-issued photo I D****