

Financial Aid Office

2121 Euclid Avenue, Cleveland, OH 44115 Phone 216-687-5411

2023-2024 Identity and Statement of Educational Purpose (To Be Signed in the Presence of a Notary)

Last Name	First Name	CSU ID#	-
()_ Phone Number (Home)	Phone Number (Cell)		
You are required to also complete this St	ratement of Educational Purpose to ver	rify your identity.	
below, such as but not limited to		ation (ID) that is acknowledged in the ID, or passport; AND	notary stateme
	Statement of Educational	Purpose	
certify that I(Print Name) Federal student financial assistance I may			
State University for 2023-2024.			
(Student's Signature)	CSU ID Numb	er (Date)	
	Notary's Certificate of Acknow	ledgement	
State of			
City/County of			
On, before me (Date)	,		
personally appeared,	, and p	y's name) proved to me on basis of satisfactory evi	idence of
(Prindentification	ated name of signer)	to be the above-named person who s	signed the
(Type of gove or going instrument.	ernment-issued photo ID provided)		
WITNESS my hand and official seal: (seal)			
(5041)		(Notary signature)	~
		My commission expires on	(Date)

This document must be mailed in to satisfy verification requirements for the Statement of Educational Purposes.