

Office Use Only **EDSTOD** 

Identity and Statement of Educational Purpose
Office of Financial Aid and Veteran Services
7101 University Ave, Texarkana, TX, Telephone: 903.334.6601 Fax: 903.223.3140
<u>FinAid@tamut.edu</u>

| STUDENT'S NAME:   | CWID:  |   |                |
|---|--|---|----------------|
| This document can be completed either in person at the <b>be faxed or scanned</b> ) into the Financial Aid Office.  | <del></del>  | · -   |                |
|   | d Statement of Educational Purpo<br>g in PersonTo Be Signed at the I               |   |                |
| The student must appear in person at Texas A&M Ungovernment-issued photo identification (ID), such as, institution will maintain a copy of the student's photoreviewed, and the name of the official at the institution | but not limited to, a driver's license, of ID that is annotated by the institution | ther state-issued ID, or pass<br>with the date it was receive | sport. The     |
| In addition, the student must sign, in the presence of t  | the institutional official, the Statement  | of Educational Purpose pro                                    | vided below.   |
|   | d Statement of Educational Purpo<br>sTo Be Signed in the Presence of               |   |                |
| If the student is unable to appear in person at Texas A to the institution:   | A&M University-Texarkana to verify hi  | s or her identity, the studen                                 | t must provide |
| (a) A copy of the unexpired valid government-issued that is presented to a notary, such as, but not limit   |  |   | ment below, or |
| (b) The original Statement of Educational Purpose p separate page than the Statement of Educational Purpose was the document notarized.   |  |   |                |
| Statement of Educational Purpose You must sign the following statement in the pro-  |  |   |                |
| I certify that I  | am the i   | ndividual signing this  |                |
| (Print Studen Statement of Educational Purpose and the best used for educational purposes and to for 2023-2024.   | nt's Name)<br>hat the Federal student financial ass                                | istance I may receive wil                                     |                |
| (Student's Signature)   | Student ID Number  | (Date)  |                |
| Place a photo copy of   | your ID in the blan  | k space below   |                |

| Notary's Certificate of Acknowledgement for Identity and Statement of Educational Purpose  |      |   |  |  |  |  |
|--|------|---|--|--|--|--|
| APPLICANT: PRINT NAME HERE:  |      |   |  |  |  |  |
| APPLICANT: SIGN HERE AS SHOWN ABOVE:   |      |   |  |  |  |  |
| Before me, the undersigned authority, on thisday of, 20, the person whose name is signed to this foregoing Statement of Educational Purpose personally appeared and, duly sworn by me, states that (s)he has read the Statement of Educational Purpose, confirmed their identify by presenting the original document whose copy appears above. |      |   |  |  |  |  |
| NOTARY PUBLIC SIGNATURE  | SEAI | L |  |  |  |  |