

CTUDENT INFORMATION

Office of Student Financial Aid

103 Wilder Tower, Memphis, TN 38152

Phone: 901.678.4825

Web: www.memphis.edu/financialaid

2021 - 2022 IDENTITY & STATEMENT OF EDUCATIONAL PURPOSE (EDPURP)

Federal financial aid guidelines require the Student Financial Aid Office to collect and maintain this documentation as part of your personal file. This form must be returned in person and signed in front of an Enrollment Services Student Support Center Staff member OR the original documents must be mailed after notarization. **DO NOT fax or email this form**.

Student Name:	U ID Number:
SSN (last four): XXX-XX	Phone Number:
A. IN PERSON	
identity by presenting an unexpired valid gover driver's license, other state-issued ID, or passp annotated by the institution with the date it was	ersity of Memphis Office of Student Financial Aid to verify his or her rument-issued photo identification (ID), such as, but not limited to, a ort. The institution will maintain a copy of the student's photo ID that is a received and reviewed, and the name of the official at the institution ID. In addition, the student must sign, in the presence of the institutional nal Purpose provided below:
Identity an	d Statement of Educational Purpose
I certify that I (Print Student's Name) Educational Purpose and that the Federal stude purposes and to pay the cost of attending the U	am the individual signing this Statement of nt financial assistance I may receive will only be used for educational niversity of Memphis for 2021-2022.
(Student's Signature)	(Date) Staff Witness:
B. BY MAIL (Originals required, fax/emai	l <u>not</u> acceptable)
her identity, the student must provide both: (To 1) A copy of an unexpired valid governm license, other state-issued ID, or U.S. p notary; and	ne University of Memphis Office of Student Financial Aid to verify his or Dee Signed With Notary) ent-issued photo identification (ID) such as, but not limited to, a driver's passport, that is acknowledged in a notary statement or that is presented to a ducational Purpose provided on this form.
	Certificate of Acknowledgement
State ofCity/County of	
On (Date) , before me (Notary's name),
personally appeared (Printed name of signer).	
and provided to me on basis of satisfactory evid	dence 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)	, , ,