



2016-2017
IDENTITY & STATEMENT
OF EDUCATIONAL PURPOSE
(IDED17)

Student Financial Aid
650 East Parkway South
Memphis, TN 38104
Main: 901.321.3305
Fax: 901.321.3227
Email: finaids@cby.edu

Instructions:

Your FAFSA was selected by the U.S. Department of Education to verify your identity and statement of educational purpose. This form must be returned in person and signed in front of a Financial Aid Representative OR the original documents must be mailed after notarization.

A. Student Information

Student Name: _____

CBU ID Number: _____

X X X - X X -

Last 4 Of SSN: _____

For Office Use Only:

B. In Person

The student must appear in person at the Financial Assistance Office to verify his or her identity by presenting a valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. **The institution will maintain a copy of the student's photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect the student's ID.**

In addition, the student must sign, in the presence of the institutional official, the following:

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 CBU for 2016-2017.

(Student's Signature)

(Date)

C. By Mail (Originals required, fax not acceptable)

If the student is unable to appear in person at the Financial Assistance Office to verify his or her identity, the student must: **(To Be Signed With Notary)**

- a. Sign the Statement of Educational Purpose above in the presence of a Notary, and
- b. provide a copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to a driver's license, other state-issued ID, or passport; and

Notary's Certificate of Acknowledgement

State of _____

City/County of _____

On (Date) _____, before me (Notary's name), _____

personally appeared (Printed name of signer), _____,

and proved to me 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) _____