AUGSBURG UNIVERSITY 2024-2025 IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

Last Name:	First Name:
Last 4 Digits of SSN:	Augsburg ID:
Phone #:	
Ident	tity and Statement of Educational Purpose
	(To be signed at the institution)
valid government-issued photo identissued ID, or passport. The institution date it was received and the name of	person at Augsburg University to verify his or her identity by presenting a tification (ID), such as, but not limited to, a driver's license, other statem will maintain a copy of the student's photo ID that is annotated with the f the official at the institution authorized to collect the student's ID.
In addition, the student must sign, ir	n the presence of the institutional official, the following:
I certify that I	(Student's Printed Name)
am the individual signing this	Statement of Educational Purpose and that the Federal student financial only be used for educational purposes and to pay the cost of attending
Student Signature:	Date:
Authorized Signature:	Date:

AUGSBURG UNIVERSITY 2024-2025 IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

Last Name:	First Name:
Last 4 Digits of SSN:	Augsburg ID:
Phone #:	
Identity	y and Statement of Educational Purpose
	(To Be Signed with Notary)
(a) A copy of the valid government below, such as but not limited	n at Augsburg University to verify his or her identity, the student must provide t-issued photo identification (ID) that is acknowledged in the notary statement to a driver's license, other state-issued ID, or passport; and ent of Education Purpose provided below.
S	tatement of Educational Purpose
I certify that I	
	(Student's Printed Name)
	If Educational Purpose and that the Federal student financial assistance I may urposes and to pay the cost of attending Augsburg University for 2024-2025.
Student Signature:	Date:
Nota	ry's Certificate of Acknowledgement
State of	City/County of
On, before m	ne,,
(Date)	(Notary's Name)
personally appeared,	, and provided to me on basis
(Pr	rinted Name of Signer)
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	
	(Notary Signature)
	My commission expires on
(seal)	(Date)