



Identity and Statement of Educational Purpose 2018-2019

Emory University
Office of Financial Aid
200 Dowman Drive, Suite 300
Atlanta, GA 30322

Phone: 404.727-6039
Fax: 404.727-6709 (Office preferred method of submission)
Email: finaid@emory.edu

Student's Name:	Emory ID (EMPL):
Email Note: Communications regarding this request will be sent via email to the student's email address marked as preferred in OPUS.	Last 4 Digits of Student SSN (if ID Number Unknown): XXX - XX - _____

*****TO BE SIGNED WITH NOTARY*****

If the student is unable to appear in person at Emory University to verify his or her identity, the student must provide:

- (a) A copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is **presented to a notary, such as but not limited to, a driver's license, other state-issued ID, or passport;** and
- (b) The original notarized Statement of Educational Purpose, which is provided below, must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

Document Submission Instructions

Documents requested by the Office of Financial Aid may be submitted via US mail, email or fax. **In an effort to safeguard your personal information, the Office prefers that forms be submitted via fax.** When submitting documentation, please do not submit image files or photographs.

Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement of Educational Purpose and that
(Print Student's Name)
the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Emory University for 2018-2019.

(Student's Signature) (Date)

Notary's Certificate of Acknowledgement

State of _____ City/County of _____

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

personally appeared, _____, and provided to me
(Printed name of signer)

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)

Internal Use Only

Receipt Date:	Approved Intake Official's Initials:
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Method of Receipt: FAIDSN—Notary

Last Update 11/1/2017