

Notarized Identity and Statement of Educational Purpose 2019-2020

Please mail this form to Shawnee State University, Financial Aid Office 940 Second Street, Portsmouth, Ohio 45662.

This form must be completed in the presence of a notary. It cannot be faxed, uploaded, or emailed.

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

- (A) A copy of the unexpired 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 Statement of Educational Purpose provided below, which 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.

Statement of Educational Purpose		
I certify that I	am the individu	aal signing this Statement of
Educational Purpose and that the federal student financial ass of attending Shawnee State University for 2019–2020.	sistance I may receive will only be used for edu	cational purposes and to pay the cost
Student Signature		Date
Student ID		
Notary's Certificate of Acknowledgment		
State of	City/County of	
On, before me,	Notary's Name	,
personally appeared,		
	Printed Name of Signer	
basis of satisfactory evidence of identification	Type of Government-issued Photo ID Pr	rovided
to be the above-named person who signed the foregoin		
WITNESS my hand and official seal:		
(Seal)		1.0
	Notar	y's Signature
My commission expires on	·	
Date		