



# 2022-2023 IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE FEDERAL STUDENT AID PROGRAMS

Financial Aid Office

4240 Campus Drive Lima, OH 45804 | (419) 995-8802 | Fax (419) 995-8112 | [FinAid@RhodesState.edu](mailto:FinAid@RhodesState.edu) | [www.RhodesState.edu](http://www.RhodesState.edu)

You have been selected by the Department of Education to provide proof of your Identity and Statement of Educational purpose. Please submit all appropriate documentation for both sections of this worksheet. **We cannot accept photocopies, fax, or emails of this worksheet**, please submit these documents in person or mail to the Financial Aid Office.

### You can mail documentation to:

Rhodes State College  
Financial Aid Office  
4240 Campus Drive  
Lima, OH 45804

### INSTRUCTIONS:

You must come to Rhodes State College in person with proper identification and complete Section A with a Financial Aid Officer. If you are unable to appear in person at Rhodes State College, you may complete Section B (on the back) in the presence of a Notary with proper identification.

*We are unable to award financial aid until these documents are received.*

## Section A: Identity and Statement of Educational Purpose

*(To be completed with a Financial Aid Officer)*

### IN PERSON:

- a) The student will appear in person at Rhodes State College and present an unexpired 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 by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID.
- b) In addition, the student will sign, in the presence of a Rhodes State College Financial Aid official, the Statement of Educational Purpose provided below.

\_\_\_\_\_  
*Student's Full Name*

\_\_\_\_\_  
*Student ID (R#)*

\_\_\_\_\_  
*Email*

\_\_\_\_\_  
*Phone*

### Statement of Educational Purpose

I certify that I, \_\_\_\_\_ am the individual signing this **Statement of Educational Purpose**  
*Print Student's Name*

and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending **Rhodes State College** for 2022-2023.

\_\_\_\_\_  
*Student's Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Student ID (R#)*

**FOR OFFICE USE ONLY: Attach a photocopy of ID after verifying identity.**

Document used: \_\_\_\_\_ Date Received: \_\_\_\_\_ Authorized by: \_\_\_\_\_





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## Section B: Identity and Statement of Educational Purpose

(To be completed with a Notary)

**WITH A NOTARY:** If you are unable to appear in person at Rhodes State College to verify your identity, you must provide the information below and sign in the presence of a notary. The original notarized copy of this document must then be provided to the Financial Aid Office.

a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement on this worksheet, such as but not limited to a driver's license, other state-issued ID, or passport;

- AND -

(b) The Statement of Educational Purpose provided below.

\_\_\_\_\_  
Student's Full Name

\_\_\_\_\_  
Student ID (R#)

\_\_\_\_\_  
Email

\_\_\_\_\_  
Phone

### Statement of Educational Purpose

I certify that I, \_\_\_\_\_ am the individual signing this **Statement of Educational Purpose** and that the  
*Print Student's Name*

Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending **Rhodes State College** for 2022-2023.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student ID (R#)

### Notary's Certificate of Acknowledgement\*\*

(required if not able to appear in person at Rhodes State College)

State of \_\_\_\_\_ City/County of \_\_\_\_\_ On \_\_\_\_\_,  
*Date*

before me, \_\_\_\_\_, personally appeared, \_\_\_\_\_, and provided  
*Notary's printed name* *Printed name of signer*

to me on the 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*

\*\*If statement is notarized, the student must provide the "original" form, we cannot accept a faxed or emailed copy.