

## 2025 - 2026**IDENTITY AND** STATEMENT OF EDUCATIONAL PURPOSE

Student Name ID #

You must verify your identity to Calvin University by presenting an unexpired, valid, governmentissued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. This must be done in person, in front of a Notary using the Notary's Certificate of Acknowledgement below. Once completed, you must submit a copy of the photo identification used along with this signed Statement of Educational Purpose to the Calvin University Financial Aid Office.

You must sign, in the presence of the Notary, the following:

## STATEMENT OF EDUCATIONAL PURPOSE

(print your name) , am the individual signing this Statement of Educational I certify that I, 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 Calvin University for 2025-2026.

Student Signature

Date

## **NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT**

State of	, City/County of	, on
before me,(Notary's na	, personally appeare	(date) ed,(printed name of signer)
(Notary's ha	ine)	(printed name of signer)
and proved to me on the b	basis of satisfactory evidence of ide (T	ntification ype of government-issued photo ID provided)
to be the above-named pe	erson who signed the Statement of I	Educational Purpose above.
WITNESS my hand and	official seal	
•		y Signature)
My commission expires of	n(date)	
	niversity Financial Aid Office 3201 Burton St SE 6-526-6134  800-688-0122  Fax 616-469-293	