

## 2026-2027 Identity and Statement of Educational Purpose

Student Name		ID		
You were selected by the federal processor for verificat instructions:	tion. You must verify your identity a	nd statement of educat	ional purpose by following these	
The student must appear IN PERSON at the Carlow U photo identification (ID), such as, but not limited to, a c student's photo ID that is annotated with the date it was ID. In addition, the student must sign, in the presence Educational Purpose below.	driver's license, other state-issued l as received and the name of the off	D, or passport. Carlow icial at Carlow Universi	University will maintain a copy of ty authorized to collect the stude	the
If the student is <b>unable</b> to appear in person at the Carlo  • A copy of the valid government-issued photo ider driver's license, other state-issued ID, or passport  • The original notarized Statement of Educational F	ntification (ID) that is acknowledged ;; <b>AND</b>	l in the notary statemen	nt below, such as but not limited t	оa
Statement of Educational Purpose				
I certify that I,Print S		, am the ind	ividual signing this	
Print S Statement of Educational Purpose and that t				
educational purposes and to pay the cost of			will only be used for	
educational purposes and to pay the cost of	attending Carlow Oniversity 10	2020-2027.		
Student's Signature		 Date	Student ID #	
5				
Notary's Certification of Acknowledgme	ent (only needed when student is unab	le to appear in person at	Carlow University)	
-				
State of	• • •			
On	, before me		,	
Date		Notary's Name		
personally appeared.		. and provided to me	on basis of satisfactory	
personally appeared,	Name of Signer	,	,	
evidence of identification				
evidence of identification	Type of government-issue	ed photo ID provided		
to be the above-named person who signed t	he foregoing instrument.			
Witness my hand and official seal			SEAL	
My Commission expires on	Notary Signature			
Date				
Office Use Only (attach photocopy of ID after verifyi	ng identity)			
Document Used		Document Expiratio	n Date	
Carlow Official's Name		Date Received		