



This form must be mailed or delivered in person. Do not upload this form.

Mail to: Pittsburg State University -Student Financial Assistance
1701 S. Broadway
Pittsburg, Ks. 66762

Deliver in person: 103 Horace Mann

24-25

SEP

Identity & Statement of Educational Purpose Form

Student's Name (First, Last, MI)

PSU ID

As a part of the verification process, the Office of Student Financial Assistance (OSFA) must verify your identity and collect your Statement of Educational Purpose.

You must appear in person at the Pittsburg State University Student Financial Assistance Office and present both of the following:

- (a) a valid unexpired government-issued photo identification (ID), such as a drivers' license, other state-issued ID, or passport; a
- (b) a signed Statement of Educational Purpose. Pittsburg State University will maintain a copy of the photo ID annotated with the date it was received and the name of the authorized official who collected your ID.

If you are unable to appear in person, you must provide the following:

- (a) a copy of the valid unexpired government-issued photo identification (ID) referenced in the Notary's Certificate of Acknowledgement below; and
- (b) the original notarized State of Educational Purpose below signed by you.

Note: To complete this requirement, you must mail the original document with your "wet" signature. An electronic uploaded copy of this form cannot be accepted.

Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement of Educational Purpose
(Print Student's First and Last 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 Pittsburg State University for 2024-2025.

(Student's Signature)

(Date)

Notary's Certificate of Acknowledgement

State of _____ City/County of _____

On _____, before me, _____, personally appeared,
(Date) (Notary's Name)

_____, and provided to me on basis of satisfactory evidence
(Printed name of signer)

of identification _____ to be the above-named person who signed the foregoing instrument.
(Type of government-issued photo ID provided)

WITNESS my hand and official seal
(Official Seal)

(Notary signature)

My commission expires on _____
(Date)

Office Use Only

(Financial Assistance Employee Signature)

(Date)

- Mailed into Office Delivered in Person Copy of Photo ID FA Staff Signature