Identity and Statement of Educational Purpose
Dependent
2015-2016

COMPLETE ALL SECTIONS: Please complete the form in ink and print legibly

Concordia Student’s Last Name  First Name  Middle Initial  Student CU ID Number

Identity and Statement of Educational Purpose
(To Be Signed at the Institution)

The student must appear in person at Concordia University, Irvine to verify his or her identity by presenting a 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 with the date it was received and the name of the official at the institution authorized to collect the student’s ID.

In addition, the student must sign, in the presence of the institutional official, the following:

Statement of Educational Purpose

I certify that I ___________________________ am the individual signing this Statement of Educational 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 Concordia University, Irvine for 2015-2016.

By signing this form, I certify the information on this form and any attachments are accurate and complete to the best of my knowledge. If requested, I agree to provide documentation to support the information I have provided on this form. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment or both, under provisions of the United States Criminal Code.

The student and one parent whose information was reported on the FAFSA must sign and date.

________________________________________  __________________________
Student’s Signature  Date

________________________________________  __________________________
Parent’s Signature  Date

Concordia University, Financial Aid Office
1530 Concordia West, Irvine, CA  92612
FAX: 949.214.3500;  Email: finaid@cui.edu;
Phone: 949.214.3066
COMPLETE ALL SECTIONS: Please complete the form in ink and print legibly

Concordia Student’s Last Name  First Name  Middle Initial  Student CU ID Number

Identity and Statement of Educational Purpose  
(To Be Signed With Notary)

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

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

(b) The original notarized Statement of Educational Purpose provided below.

Statement of Educational Purpose

I certify that I _____________________________ am the individual signing this Statement of Educational 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 Concordia University, Irvine for 2015-2016.

________________________________________________________________________

(Student’s Signature)  (Date)

(Parent Signature whose information is on the FAFSA)  (Date)

Notary’s Certificate of Acknowledgement

State of __________________________  City/County of __________________________

On __________________________, before me, __________________________, personally appeared, __________________________, and provided to me (Printed name of signer) on 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)

By signing this form, I certify the information on this form and any attachments are accurate and complete to the best of my knowledge. If requested, I agree to provide documentation to support the information I have provided on this form. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment or both, under provisions of the United States Criminal Code.

Return Form with document(s) to:  Concordia University, Financial Aid Office  
1530 Concordia West, Irvine, CA 92612  
FAX: 949.214.3500; Email: finaid@cui.edu; Phone: 949.214.3066