



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

The student must appear in person at the **La Roche University Office of Financial Aid** to verify his or her identity by presenting 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

(Print Student's Name)

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 La Roche University for 2023-2024.

\_\_\_\_\_  
(Student's Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Student's ID Number)



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

If the student is unable to appear in person at **La Roche University Office of Financial Aid** 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  
 \_\_\_\_\_  
 (Print Student's Name)  
 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  
 La Roche University 2023-2024.

\_\_\_\_\_  
(Student's Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Student's ID Number)

### Notary's Certificate of Acknowledgement

State of \_\_\_\_\_

City/County of \_\_\_\_\_

On \_\_\_\_\_, before me, \_\_\_\_\_,  
 (Date) (Notary's name)

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)



# LA ROCHE UNIVERSITY

## Certifications and Signatures (Dependent Student)

### Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

**WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.**

\_\_\_\_\_  
Print Student's Name

\_\_\_\_\_  
Student's ID Number

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date



# LA ROCHE UNIVERSITY

## Certification and Signature (Independent Student)

### Certification and Signature

Each person signing below certifies that all of the information reported is complete and correct.

**WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.**

\_\_\_\_\_  
Print Student's Name

\_\_\_\_\_  
Student's ID Number

\_\_\_\_\_  
Student's Signature (Required)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse's Signature (Optional)

\_\_\_\_\_  
Date