



**Financial Aid, Student Employment
& Military Education Benefits**
 Mellencamp Hall, Room 162, P.O. Box 469, Milwaukee, WI 53201-0469
 Phone: (414) 229-4541 Fax: (414) 229-5699 Email: finaid@uwm.edu

**2019-20 Notary Statement of Educational Purpose
 Identity and Statement of Educational Purpose (To Be Signed with Notary)**

Section A – Student Information (Please print clearly)

STUDENT NAME:	STUDENT ID #:
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Section B – Statement of Educational Purpose

If the student is unable to appear in person at the **University of Wisconsin-Milwaukee** Department of Financial Aid, Student Employment and Military Benefits to verify his or her identity, the student must provide to the institution:

- (a) A copy of the **unexpired valid government-issued photo identification (ID)** that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver’s license, other state-issued ID, or passport; and
- (b) The **original (cannot be faxed/scanned)** notarized Statement of Educational Purpose provided below.

Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement of
 (Print Student’s Name)

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 the University of Wisconsin-Milwaukee for 2019-2020.

_____ Student Signature Date Student ID#

Section C – Notary’s Certificate of Acknowledgement

State of _____ City/County of _____

On _____, before me, _____ personally appeared,
 (Date) (Notary’s name)

_____, and proved to me on basis of satisfactory
 (Printed name of signer)
 evidence of identification _____ to be the above-named
 (Type of unexpired government-issued photo ID provided)

person who signed the foregoing instrument.

WITNESS my hand and official seal
 (seal) _____ (Notary signature)

My commission expires on _____
 (Date)