## IDENTITY & STATEMENT OF EDUCATIONAL PURPOSE 2025-2026 (IDED25)

Federal financial aid guidelines require the Student Financial Aid Office to collect and maintain this documentation as part of your financial aid file. This form must be returned in person and signed in front of a CBU Financial Aid Staff member OR the original documents must be mailed after notarization. DO NOT fax or email this form.

A. Student Information	
Student Name:	CBU ID Number:
SSN (Last Four) <b>XXX-XX-</b>	Phone Number:
B. In Person	
identification (ID), such as, but not limited to, a driver's license, oth	ce to verify his or her identity by presenting valid government-issued photo her state-issued ID or a U.S. passport. The institution will maintain a copy received and the name of the official at the institution authorized to
In addition, the student must sign, in the presence of the institutio	nal official, the following:
Statement of Educational Purpose	
I certify that I (Print Name) 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 CBU for 2024-2025.	
STUDENT SIGNATURE DATE	STAFF WITNESS
C. By Mail (Originals required, fax not acceptable)	
	ancial Aid Office to verify his or her identity, the student must
	to identification (ID) such as, but not limited to, a driver's license, edged in a notary statement or that is presented to a notary; and ose provided on this form.
Notary's Certific	ate of Acknowledgement
State ofCit	ry/County of
On (Date), before me (Notary's name),	personally appeared
(Printed name of signer),	, and proved to me 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	NOTARY SIGNATURE
	My commision expires on (date)