

Walden University

2016-2017 Identity and Statement of Educational Purpose - Notarized

STUDENT NAME: _____

STUDENT ID: _____

You are required to verify your identity with Walden University. You must provide **BOTH** items listed below to Walden University **BY U.S. POSTAL MAIL**.

You must provide the following two items to the Office of Financial Aid:

1. 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:

- Driver's license
- Other state-issued ID
- Passport

It is against the law to photocopy a military ID. Therefore, a military ID may not be used for this purpose.

2. The original, notarized Statement of Educational Purpose which is provided below.

****Enter your Walden ID number or Social Security Number for "Student's ID Number" above – Do not leave this blank. ****

PLEASE NOTE: Per federal regulations, Walden University **CANNOT** accept this document through email or fax. You **MUST MAIL** this original document, along with the copy of the photo ID presented to the Notary, directly to Walden University at the address listed at the bottom of the form. **The copy of the valid ID must be legible. Walden University must be able to clearly see the photo image on the ID.**

You must sign, in the presence of a Notary, the following:

STATEMENT OF EDUCATIONAL PURPOSE

I certify that I _____ am the individual signing this Statement of Educational Purpose and
(Print Student's Name)

that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Walden University for 2016-2017.

(Student's Signature)

(Date)

Notary's Certificate of Acknowledgement

State of _____

City/County of _____

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

personally appeared, _____, and proved to me on basis of satisfactory
(Printed Name of Signer)

evidence 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
(SEAL)

(Notary Signature)

My commission expires on _____
(Date)

YOU MUST MAIL THIS ORIGINAL DOCUMENT TO THE BELOW ADDRESS – DO NOT FAX

Office of Financial Aid • Walden University • 7065 Samuel Morse Drive, Columbia, MD 21046

1-800-925-3368 Revised 05.03.17