## UW-Parkside Student Financial Aid 2024-2025 IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

To be signed at UW-Parkside

To be eligible for Federal and State aid programs, this document must be submitted prior to the students last date of attendance for the academic year (2024-2025).

The student must appear in person at the Office of Scholarships and 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 Office of Scholarships and Financial Aid will maintain a copy of the student's photo ID that is annotated with the date it was received and reviewed 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.

A. Statement of Educationa	l Purpose	
I certify that I,	Print name	, am the individual signing
this Statement of Education		eral student financial assistance I may receive will be used only for educational
purposes and to pay the cos	t of attending the Universi	ty of Wisconsin-Parkside for 2024-2025.
		<b>WARNING:</b> If you purposely provide false or misleading information on this worksheet, you may be fined, sentenced to jail, or both
Student Signature (required)		Date
B. ID Submitted		
		present your identification to the representative at the Office of Scholarships ies are not acceptable. Identification must be current (not expired).
Driver's License	State-Issued ID	Passport Other government issued photo ID
C. Student Information		
		XXXXX
Student First Name	Last Name	Social Security Number Date of Birth
Address	City	State ZIP Phone Number
For Office Use Only		
Document received by UW-Par	kcido authorizad individual:	
Document received by OW-Par	KSIGE AUTHORIZED HIDIVIDUAL:	Print name
Student's ID:		Date: