



OFFICE OF FINANCIAL AID

Name (Last, First): _____

SUA ID #: _____

Date: _____

Cell Phone #: _____

You must complete all sections. Do not leave any question response blank. Forms submitted with blanks will be considered incomplete and may delay receipt of financial aid.

SECTION A: VERIFICATION OF HIGH SCHOOL COMPLETION

Please attach **ONE** of the following documents to this form indicating your high school completion status as of the date you will begin your classes at Soka University of America for the 2019–2020 school year:

- A copy of the student’s high school diploma.
- For students who completed secondary education in a foreign country:
 - A copy of the “secondary school leaving certificate” or other similar document.
- A copy of the student’s final official high school transcript that shows the date when the diploma was awarded.
- A state certificate or transcript received by a student, after that student passed a state-authorized examination that the state recognizes as the equivalent of a high school diploma (e.g., GED test, HiSET, TASC, or other state-authorized examination).
- An academic transcript that indicates the student has successfully completed at least a two-year program that is acceptable for full credit toward a bachelor’s degree.
- For a student who was homeschooled in a state where state law **does** require the student to obtain a “secondary school completion credential” for home-schooling (other than a high school diploma or its recognized equivalent):
 - A copy of the “secondary school completion credential”.
- For a student who was home-schooled in a state where state law **does not** require the student to obtain a “secondary school completion credential” for home-schooling (other than a high school diploma or its recognized equivalent):
 - A transcript, or the equivalent, signed by the student's parent or guardian, that lists the secondary school courses completed by the student; and which includes a statement stating that the student successfully completed a secondary school education in a home-school setting.

SECTION B: SIGNATURE(S)

By signing this form, you certify that all of the information you provided is true and complete to the best of your knowledge and you agree, if asked, to provide information that will verify the accuracy of your completed form.

Student Name (print)

Signature

Date

(This form requires handwritten signatures. Photocopies of handwritten signatures are permitted. Electronic, or typed, signatures will not be accepted.)

Please email, mail, or deliver this form in person to the address below. Please write your ID# on attached or supporting documents.



SECTION C: IDENTITY & STATEMENT OF EDUCATIONAL PURPOSE

You must appear in person at the Office of Financial Aid to verify your identity by presenting a valid government-issued photo identification (ID) such as, but not limited to: a Driver’s License, State-issued ID, Passport, or other such documentation.

Soka University 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, you must sign, in the presence of the Office of Financial Aid staff, the *Statement of Educational Purpose* below. **If you are unable to sign this form in person, you may take this form to a Notary, and complete and sign this document (below) in their presence.**

Verification of Identity

Statement of Educational Purpose

I certify that I, _____, 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 Soka University of America for the 2019-20 academic year.

_____ Signature _____ Date _____

Student Name (print)

SUA ID Number
(This form requires handwritten signatures. Photocopies of handwritten signatures are permitted. Electronic, or typed, signatures not accepted.)
Please email, mail, or deliver this form in person to the address below. Please write your ID# on attached or supporting documents.

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= **NOTE:** *If you are unable to appear at the Office of Financial Aid in person and sign this document, you must complete this form and include a signed & sealed “Notary Certificate of Acknowledgement” (provided below).*

Notary Certificate of Acknowledgement

State of _____, City/county of _____ on _____
before me, _____ personally appeared, _____
(Notary’s name) (Printed name of signer)

Provided 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 _____
(Seal) (Notary signature) (Date)

My commission expires on _____