



Identity & Statement of Educational Purpose Office of Financial Aid (VERIF)

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Complete all sections. Leave no blank responses. Forms with blanks are incomplete and may delay receipt of financial aid.

SECTION A: IDENTITY & STATEMENT OF EDUCATIONAL PURPOSE

You must appear in-person at the Soka Office of Financial Aid to verify your identity by presenting a valid government-issued photo identification such as (but not limited to): Driver's License, Military ID, State-issued ID, Passport, or other documentation. Soka University will maintain a copy of the student's photo ID, annotated with the date received and the name of the official at the institution authorized to collect the student's ID.

You must sign this form in the presence of Office of Financial Aid staff. If you are unable to sign this form inperson; you may take this form to a Notary, and complete and sign this document in their presence.

Verification of Identity		
<u>Staten</u>	nent of Educational Purpos	<u>se</u>
I certify that I,	udent financial assistance I m	ay receive will only be used for
Student Name (print) Signat	ture	Date
SUA ID Number		
(This form requires handwritten signatures. Photocopies of I Please email, mail, or deliver this form in person to the addre	ess below. Please write your ID# on att	ached or supporting documents.
NOTE: If you are unable to appear at the Office complete this form and include a signed & second and include a signed when the complete this form and include a signed when the complete this form and include a signed when the complete the	-	knowledgement" (provided below).
State of, City	//county of	, on,
before me,	personally appeared	d, ,
before me,(Notary's name)	<u> </u>	(Printed name of signer)
Provided to me on basis of satisfactory evider		government-issued photo ID provided)
To be the above-named person who signed the	he foregoing instrument.	
Witness my hand and official Seal (below)	(Notary signature)	(Date)
	My commission expires of	n

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