

# Identity Verification and Statement of Educational Purpose

(To be signed with Notary)

ACADEMIC YEAR 2025-26

## FORM PURPOSE AND INSTRUCTIONS:

Your 2025-26 Free Application for Federal Student Aid (FAFSA) was selected for review. The law requires that before finalizing your financial aid application, you must verify your Identity and Educational Purpose. To verify this information, you must complete this form and forward it to the University of Rhode Island.

Please complete this form carefully as missing or incomplete information will delay URI from finalizing your financial aid application. You must complete and sign this worksheet, attach any required documents, and submit all information by mail or in-person to the following address:

University of Rhode Island, Enrollment Services (Green Hall)  
6 Rhody Ram Way  
Kingston, RI 02881

**NOTE: Faxes, email, and copies of this form cannot be accepted.**

If the student is unable to appear in person at the University of Rhode Island to verify his or her identity the student must present their ID and sign the Statement of Educational Purpose in the presence of a notary public:

- A. A copy of the valid unexpired government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to a driver's license, other state-issued ID, or passport; and
- B. The original notarized Statement of Educational Purpose provided below.
  - Notary public must acknowledge in-person receipt of both documents in the notary statement.
  - Student or notary must deliver the copy of the ID and the signed Statement with the original "wet" signature to the financial aid office
  - by:
    - o Hand delivery; or
    - o U.S. Postal Service or courier service (ex: UPS, FedEx)
  - ID and Statement of Educational Purpose must be presented at the same time (whether in-person to the designated official or to a notary public).

## Statement of Educational Purpose

I certify that I \_\_\_\_\_ am the individual signing this State of Educational Purpose and that the  
(Print Student's Name)

federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending the University of Rhode Island for 2025-26.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student ID #

**Notary Certificate of Acknowledgement**

State of \_\_\_\_\_ City/County of \_\_\_\_\_ On \_\_\_\_\_,  
(date)

before me, \_\_\_\_\_, personally appeared, \_\_\_\_\_, and provided to me  
(Notary's name) (Printed name of signer)

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)

My commission expires on \_\_\_\_\_  
(date)