Office of Student Financial Assistance

2019-2020

IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

Student's Name:_____ UCF ID:_____

To Be Signed at the Institution

The student must appear in person at **University of Central Florida** to verify his or her identity by presenting unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The institution 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, the student must sign,** in the presence of the institutional official, the following:

Statement of Educational Purpose

I certify that I _____
Print Student's Name
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 **University of Central Florida** for 2019-2020.

_____ _____
Student's Signature *Date*

_____
Student's UCF ID

Declaración de Propósito Educativo

Certifico que yo, _____,
Imprimir Nombre del Estudiante
soy el individuo que firma esta Declaración de Finalidad Educativa y que la ayuda financiera federal estudiantil que yo pueda recibir, sólo será utilizada para fines educativos y para pagar el costo de asistir a la **Universidad de la Florida Central (UCF)** para 2019–2020.

_____ _____
Firma del Estudiante *Fecha*

_____
Número de Identificación del Estudiante

For Office Use Only

Original document used (check one). Attach photocopy of ID after verifying identity.

- o Driver's License
- o State-Issued ID:
- o Passport
- o Other: _____

Document Expiration Date: _____

Date Original Document Received: _____ SFA Official's Printed Name: _____

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An Equal Opportunity and Affirmative Action Institution