

I certify that I

NO

## FINANCIAL AID & SCHOLARSHIPS OFFICE

## IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

(To Be Signed in the Presence of a Notary)

\_ am the individual signing this

E-Mail: finaid@umkc.edu

Toll Free: 1-800-775-UMKC

If the student is unable to appear in person at the University of Missouri – Kansas City Financial Aid Office to verify his or her identity, the student must provide to the institution:

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, other state-issued ID, or passport; **and**
- (b) The original Statement of Educational Purpose provided below, which *must be notarized*. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

Statement of Educational Purpose and that the federal student financial assistance I may receive will

## STATEMENT OF EDUCATIONAL PURPOSE

(Print Student's Name)

Kansas City for 2020-2021.		
Student's Signature)	(Date)	(Student's ID Number)
ARY'S CERTIFICATE OF	ACKNOWLEDGEMI	ENT
State of		
City/County of		
On , before me,		
		,
(Date) personally appeared,	(Printed Name of Signer)	, and provided to me
on basis of satisfactory evidence of identific	cation	
o be the above-named person who signed	(Type of Government the foregoing instrument.	-issued Photo ID Provided)
	(Notary Signature)	
WITNESS my hand and official seal	My commission expires on	
	iny commission expires on	(Date)
(seal)	i	, ,

Phone: 816-235-1154

Fax: 816-235-5511