

Lcertify that L

Student Last Name:	
Student First Name:	
Student AU ID #:	

am the individual signing this

Identity and Statement of Educational Purpose (To Be Signed at the Institution)

The student must appear in person at Adelphi University to verify his or her identity by presenting an 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 by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student's ID. In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

Statement of Educational Purpose

(Print Student's Name)				
Statement of Educational Purpose and	d that the Federal s	student financial as	sistance I may receive will	
only be used for educational purposes	and to pay the co	st of attending Adel	phi University for 2024-2025.	
Student signature:		Date:		
•				
One-Stop Student Services Center – Office use ONLY:				
ADELPHI STAFF MEMBER NAME: (PRINT)		ADELPHI STAFF MEMBER SIGNATURE:		
Date:	Copy of ID attached:		Doc. Of HS diploma on file:	
	. •		·	