You must appear in person at Sul Ross State University Financial Aid Office to present your government-issued ID (such as driver's license, passport, etc.) to an institutionally-authorized financial aid administrator. The administrator will validate your identity and you must sign, in the presence of the financial aid administrator, the Statement of Educational Purpose (ATTACHMENT A).

If you cannot appear in person to submit the documentation, as above, you must present your government issued ID (such as driver’s license, passport, etc.) to a public notary. The public notary will validate your identity and you must sign, in the presence of the public notary, the Statement of Educational Purpose (ATTACHMENT B).

You must submit the original Attachment (A) or (B) AND present your government-issued ID to the appropriate SRSU Financial Aid Office. Faxes or copies will not be accepted. You may mail the original attachment and notarized copy of your ID to:

Center for Enrollment Services
P.O. Box C-2
Alpine, TX 79832
Phone: (432) 837-8050
Fax: (432) 837-8411
E-mail: fa@sulross.edu

Office of Financial Aid
3107 Bob Rogers Drive
Eagle Pass, TX 78852
Phone: (830) 758-5021
Fax: (830) 758-5019
E-mail: rgcfao@sulross.edu

Office of Financial Aid
2623 Garner Field Road
Uvalde, TX 78801
Phone: (830) 279-3008
Fax: (830) 279-3009
E-mail: rgcfao@sulross.edu

Office of Financial Aid
205 Wildcat Drive
Del Rio, TX 78840
Phone: (830) 703-4824
Fax: (830) 703-4810
E-mail: rgcfao@sulross.edu
TO BE SIGNED AT THE INSTITUTION IN THE PRESENCE OF A FINANCIAL AID ADMINISTRATOR

The student must appear in person at __________________________________________________________
(Name of Postsecondary Educational Institution)

in the presence of the financial aid administrator, to verify his or her identity by presenting a 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 financial aid administrator, the following:

**Statement of Educational Purpose**

I certify that I _______________________________________________________ am the individual signing this (Print Student’s Name)

Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purpose, and to pay the cost of attending _______________________________________________________ for 2015-2016.

(Name of Postsecondary Educational Institution)

**Certification**

I certify that all information is complete and correct. In accordance with federal regulations, I understand that if I purposely give false or misleading information I may be fined, be sentenced to prison, or both.

_________________________________________  _________________________
Student’s Signature  Date  Student ID Number

For Institutional Use Only:

Financial Aid Administrator Signature: ______________________________________________________ collected

☐ photo identification and  ☐ witnessed student signature on ________________________________, 20______.
TO BE SIGNED IN THE PRESENCE OF A PUBLIC NOTARY
IF YOU ARE UNABLE TO SIGN AT THE INSTITUTION

If the student is unable to appear in person at ____________________________________________________________ (Name of Postsecondary Educational Institution) to verify his or her identity, the student must provide:
(a) A copy of the valid 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; and
(c) Return this original notarized Statement of Educational Purpose and a copy of your valid government-issued photo identification (ID) to the SRSU Financial Aid Office.

Statement of Educational Purpose

I certify that I _____________________________________________________ am the individual signing this (Print Student’s Name)
Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purpose, and to pay the cost of attending ___________________________________________________________ for 2015-2016. (Name of Postsecondary Educational Institution)

Certification
I certify that all information is complete and correct. In accordance with federal regulations, I understand that if I purposely give false or misleading information I may be fined, be sentenced to prison, or both.

________________________________________________ __________ ________________________
Student’s Signature Date Student ID Number

Notary’s Certificate of Acknowledgment

State of __________________________, City/County of _________________________

On ______________________________, before me, ________________________________________________________________, personally appeared, (Notary’s name)

_____________________________________________________, and provided to me on basis of satisfactory evidence of identification (Printed name of signer)

______________________________________________________ to be the above-named person who signed the foregoing instrument. (Type of government-issued photo ID provided)

WITNESS my hand and official seal

______________________________________________________
(Notary Signature)

My commission expires on ________________________________
(Date)

Notary Seal

State law requires that you be informed of the following: (1) you are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law); (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you.