2015-2016

FORM 4 - FISEP

FRESNO STATE
Financial Aid

Financial Aid Office
5150 N. Maple Avenue, M/S JA 64
Fresno, CA 93740-8026
Phone: (559) 278-2182 Fax: (559) 278-4833
www.fresnostate.edu/studentaffairs/financialaid/

Identity and Statement of Education Purpose Form

STUDENT ID	STUDENT LAST NAME	STUDENT FIRST NAME	PHONE NUMBER (with area code)

PLEASE PRINT IN BLACK INK

*This form can **only be completed in person** at Fresno State's Financial Aid Office, located in the Joyal Administration Building, Room 296.*

The student must appear in person at Fresno State 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, non-driver's identification card, other state-issued ID or passport. The institution will maintain a copy of the student's valid government-issued photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect the identification.

In addition, the student must sign in the presence of the institutional official, the following:

Statement of Educational Purpose

I certify that I, _____ am the individual signing this Statement of
STUDENT'S NAME PRINTED

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 Fresno State for 2015-2016.

_____ _____ _____
Student Signature Student's ID Number Date

OFFICE USE ONLY

ID Type: ☐ Driver's License ☐ Non-Driver's State ID ☐ Other State ID ☐ Passport

#_____ **State**_____ **Exp.**_____

Authorized official who witnessed signature & reviewed ID_____ **Date**_____

VERIFICATION

❒ **V4 Verification:** ☐ Copies ☐ Checklist ☐ Comment ☐ Check out ☐ Flags ☐ SAR C ☐ Manual Award ☐ FWD Scanning & File

❒ **V5 Verification:** ☐ Copies ☐ Checklist ☐ Comment ☐ SAR C ☐ FWD Priority Scanning & File

Comments _____ Completed By_____

_____ Date _____