

**2026-2027 IDENTITY/STATEMENT OF
EDUCATIONAL PURPOSE WORKSHEET
(Notary Only)**

Office of Scholarships & Financial Aid
201 Thompson Center
Winston Salem, NC 27110
Phone: 336-750-3296
financial.aid@wssu.edu
Federal School Code: 002986



This form must be signed in the presence of a Notary Public (below). Do not complete the form in advance!

Student Name: _____ **Rams ID #:** _____

The student must appear in person of a Notary Public 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. **Government-issued Military photo ID cannot be used to complete this form.** If you are unable to appear in person to complete this form, you **must** mail the original required documentation to the address provided. You will need to mail the following:

- ◆ The Identity Statement of Educational Purpose worksheet signed by you and a notary.
- ◆ A copy of your unexpired valid government-issued photo identification.

If the student is unable to appear in person at Winston Salem State University 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.

Identity and Statement of Educational Purpose

- ◆ I certify that I _____ 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 WSSU for 2026-2027.

Student's Signature

Student's ID Number

Notary's Certificate of Acknowledgment

State of _____ City/County Of _____

On ____/____/____, before me, _____, personally appeared,
(Date) (Notary's Name)

a _____, 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)

(Seal)