



Scholarships and
Financial Aid

174 Knight Hall
Dept. 3335
1000 E. University Ave
Laramie, WY 82071

Phone: (307) 766-2116
Fax: (307) 766-3800
TTY: (307) 766-3635
www.uwyo.edu/sfa
finaid@uwyo.edu

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

The student must appear in person at the **University of Wyoming Scholarship and Financial Aid Office** 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

I certify that I _____ am the individual signing
(Print Student's Name)
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
_____ for 2023-2024.
(Name of Postsecondary Educational Institution)

(Student's Signature)

(Date)

(Student's ID Number)

Declaración de Propósito Educativo

Certifico que yo, _____, soy el individuo que firma esta
[Imprimir nombre del estudiante]

Declaración de Propósito Educativo, y que la ayuda financiera federal estudiantil
que yo pueda recibir sólo será utilizada para fines educativos y para pagar el
costo de asistir a _____ para 2023-2024.
[Imprimir nombre de institución educativa postsecundaria]

[Firma del estudiante]

[Fecha]

[Número de identificación del estudiant]



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Identity and Statement of Educational Purpose (To Be Signed in the Presence of a Notary)

If the student is unable to appear in person at the **University of Wyoming Scholarship and 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

I certify that I _____ am the individual signing
(Print Student's Name)
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 _____ for 2023-2024.

(Name of Postsecondary Educational Institution)

(Student's Signature)

(Date)

(Student's ID Number)

Declaración de Propósito Educativo

Certifico que yo, _____, soy el individuo que firma esta
[Imprimir nombre del estudiante]

Declaración de Propósito Educativo, y que la ayuda financiera federal estudiantil que yo pueda recibir sólo será utilizada para fines educativos y para pagar el costo de asistir a _____ para 2023-2024.

[Imprimir nombre de institución educativa postsecundaria]

[Firma del estudiante]

[Fecha]

[Número de identificación del estudiante]



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Notary's Certificate of Acknowledgement

Notary's certification may vary by State

State of _____

City/County of _____

On _____, before me, _____,

(Date)

(Notary's name)

personally appeared, _____, and proved to me

(Printed name of signer)

on basis of satisfactory evidence of identification _____

(Type of government-issued photo ID provided)

to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

(seal)

(Notary signature)

My commission expires on _____

(Date)

Per Federal Regulations, the student **must mail** this original signed form with a copy of the ID to:

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