2018-2019 FAIDST

Identity and Statement of Educational Purpose

Office of Student Financial Services
P. O. Box 20036 • Houston, TX 77225
(713) 500-3860 phone • (713) 500-3863 fax
https://www.uth.edu/sfs/

St	ud	ent	: IC)	

Notary

Your 2018–2019 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. Federal regulations require this institution to verify the information you reported on your FAFSA with the information reported on this worksheet. If there are differences, we may be required to correct your FAFSA information. Failure to submit this information will prohibit your federal aid from disbursing to your student account. Please attach copy of government-issued photo ID and return **notarized form** with documents to Office of Student Financial Services.

	lding, 7000 Fannin, Suite 2220, Houston, TX Financial Services, P. O. Box 20036, Houstor	
COI	MPLETE ALL SECTIONS	, -
Ctudent Leet Name	First Name	Middle Initial
Student Last Name	riistivaine	Wildele Hittel
A. IDENTITY AND STATEMENT OF EDU	CATIONAL PURPOSE	
(To Be	d Statement of Educational Purpose Signed in the Presence of a Notary)	
f the student is unable to appear in person at		
to verify his or her identity the student must provide to t	(Name of Postsecondary Educational Institution:	on)
(a) A copy of the unexpired valid government-iss	ued photo identification (ID) that is acknow	ledged in the notary
statement below, or that is presented to a nota or passport; and	ary, such as, but not limited to, a driver's lic	ense, other state-issued ID,
(b) The original Statement of Educational Purpose statement appears on a separate page than th that the Statement of Educational Purpose was	ne Statement of Educational Purpose, there	•
Stater	ment of Educational Purpose	
certify that I,, an (Print Student's Name)	n the individual signing this Statement of E	ducational Purpose and
(Print Student's Name) hat the Federal student financial assistance I may recei		
		ses and to pay the cost
of attending(Name of Postsecondary Educational Institution)	for 2018-2019.	
	D 1	
Student Signature (no electronic signatures accepted)	Date	
Student Signature (no electronic signatures accepted) B. NOTARY'S CERTIFICATE OF ACKNOW		
B. NOTARY'S CERTIFICATE OF ACKNOW		
B. NOTARY'S CERTIFICATE OF ACKNOW	VLEDGMENT	
B. NOTARY'S CERTIFICATE OF ACKNOW State of City/County of	VLEDGMENT	
B. NOTARY'S CERTIFICATE OF ACKNOW State of City/County of	VLEDGMENT	
B. NOTARY'S CERTIFICATE OF ACKNOW State of City/County of	VLEDGMENT	
B. NOTARY'S CERTIFICATE OF ACKNOW State of	VLEDGMENT (Notary's Name)	
B. NOTARY'S CERTIFICATE OF ACKNOW State of	(Notary's Name), and provi	ded to me
B. NOTARY'S CERTIFICATE OF ACKNOW State of	(Notary's Name), and provi	ded to me
B. NOTARY'S CERTIFICATE OF ACKNOW State of	(Notary's Name), and provious of unexpired Government-Issued Photo ID provided in the content of the con	ded to me
B. NOTARY'S CERTIFICATE OF ACKNOW State of	(Notary's Name), and provious of unexpired Government-Issued Photo ID provided in the content of the con	ded to me
B. NOTARY'S CERTIFICATE OF ACKNOW State of	(Notary's Name), and provious of unexpired Government-Issued Photo ID provided in the content of the con	ded to me

My commission expires on ___

(Date)