



**Please return this form to:**  
 Wilmington College 937.382.6661  
 Pyle Center Box 1184 800.341.9318 x600  
 1870 Quaker Way wilmington.edu  
 Wilmington, OH 45177 sos@wilmington.edu  
 937.383.8564 f

**2023-2024 IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE**

**SECTION A: STUDENT INFORMATION**

STUDENT NAME: \_\_\_\_\_ STUDENT ID: \_\_\_\_\_

Your application has been selected for verification. We are required by federal law (34 CFR, Part 668) to compare the information from your Free Application for Federal Student Aid (FAFSA) with the information provided on this form.



**THIS FORM MUST BE COMPLETED AND SIGNED IN THE PRESENCE OF EITHER A WILMINGTON COLLEGE FINANCIAL AID OFFICIAL OR A NOTARY PUBLIC. DO NOT COMPLETE THE FORM IN ADVANCE.**

**PLEASE NOTE:**

- ✓ We cannot continue processing your financial aid until all required financial aid documents have been submitted.
- ✓ All required documents must be uploaded to your Financial Aid Student Self-Service Portal.

**SECTION B: IDENTITY/STATEMENT OF EDUCATIONAL PURPOSE. COMPLETE OPTION B1 OR B2.**

- YOU HAVE **TWO OPTIONS** TO VERIFY YOUR IDENTITY/STATEMENT OF EDUCATIONAL PURPOSE. COMPLETE ONLY ONE OPTION.

**OPTION B1**

The student must appear in person at the Wilmington College Student One Stop Center 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.

**TO BE SIGNED AT THE INSTITUTION**

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 WILMINGTON COLLEGE FOR 2023-2024.

STUDENT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

STUDENT'S ID #: \_\_\_\_\_

**FOR OFFICE USE ONLY – TO BE COMPLETED BY AUTHORIZED FINANCIAL AID OFFICIAL**

*I certify that I am an institutionally authorized individual and the student identified above appeared in person before me and presented to me an original Valid Government-Issued Photo ID.*

FINANCIAL AID OFFICIAL'S NAME:			
FINANCIAL AID OFFICIAL'S SIGNATURE:			
TYPE OF ID PROVIDED:			
ID NUMBER:		EXPIRATION DATE:	

**ATTACH COPY OF ORIGINALLY PRESENTED VALID GOVERNMENT-ISSUED PHOTO IDENTIFICATION DOCUMENT.**

**SECTION B: IDENTITY/STATEMENT OF EDUCATIONAL PURPOSE. (CONTINUED)**

**OPTION B2**

If the student is **UNABLE TO APPEAR IN PERSON** at Wilmington College to verify his or her identity, the student must provide to the institution:

**TO BE SIGNED IN THE PRESENCE OF A NOTARY**



- 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 WILMINGTON COLLEGE FOR 2023-2024.

STUDENT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

STUDENT'S ID #: \_\_\_\_\_

**NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT**

STATE OF:			
CITY/COUNTY OF:			
ON,		, BEFORE ME,	
	<i>(DATE)</i>		<i>(PRINT NOTARY'S NAME)</i>
PERSONALLY APPEARED,		AND PROVED TO ME	
	<i>(PRINT STUDENT'S NAME)</i>		
BECAUSE OF SATISFACTORY EVIDENCE OF IDENTIFICATION		<i>(TYPE OF UNEXPIRED GOVERNMENT-ISSUED PHOTO ID PROVIDED)</i>	
TO BE THE ABOVE-NAMED PERSON WHO SIGNED THE FORGOING INSTRUMENT.			
WITNESS MY HAND AND OFFICIAL SEAL		<i>(NOTARY'S SIGNATURE)</i>	
STAMP SEAL HERE			
MY COMMISSION EXPIRES ON			
	<i>(DATE)</i>		

**ATTACH COPY OF ORIGINALLY PRESENTED UNEXPIRED VALID GOVERNMENT-ISSUED PHOTO IDENTIFICATION DOCUMENT.**



PLEASE NOTE THAT IF YOU CHOOSE OPTION B2, THIS FORM AND A COPY OF THE UNEXPIRED VALID GOVERNMENT-ISSUED PHOTO IDENTIFICATION DOCUMENT MUST BE MAILED TO WILMINGTON COLLEGE. FEDERAL LAW PROHIBITS US FROM ACCEPTING THIS FORM AS A FAXED OR SCANNED DOCUMENT.