University of Central Missouri Student Financial Services P.O. Box 800 1100 Ward Edwards Building Warrensburg, MO 64093

Phone 660-543-8266 Webpage: www.ucmo.edu/sfs Documents Only Email: financialassistance@ucmo.edu

## Identity and Statement of Educational Purpose 2024/2025

UCM use only
EDPURP

(To Be Signed at the Institution)

The student must appear in person at **University of Central Missouri Student Financial Services** 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, annotated with the date it was received, and the name of the official at the institution authorized to collect the student's ID.

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
(Print Student's Name) Statement of Educational Purpose and I may receive will only be used for educational the University of Central Mis	d that the federal student financial assistance ucational purposes and to pay the cost of esouri for 2024-2025.
(Student's Signature)	(Date)
(Student's ID Number)	
University of Central Missouri Student during regular office hours. You must confine Financial Services counselor. This for	alid government-issued photo ID as described above to Financial Services in 1100 Ward Edwards Building complete and sign this form in the presence of a Student form, along with an annotated copy of your valid lete part of the required verification of your 2024/2025 (FAFSA) data.
======OFF	ICE USE ONLY====================================
I have received and reviewed the documents for	or the student named above.
Financial Aid Counselor Signature	Date