



Verification of Identity and Statement of Educational Purpose

A. STUDENT INFORMATION

Last name

First name

M.I.

UH ID Number

Phone Number

Date of Birth

B. IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

(TO BE SIGNED WITH NOTARY, if you are not able to submit the document in person)

Instructions for completing in-person at postsecondary educational institutional:

1. Please present an unexpired valid government-issued photo identification (ID), such as but not limited to a driver's license, other state-issued ID, or passport to the financial aid office.

Instructions for completing with Notary, if not able to go in-person:

1. A copy of the unexpired 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
2. The original Statement of Educational Purpose provided below, which must be notarized.
3. The original document must be mailed/given to the Financial Aid Office. **Faxed or emailed versions will not be accepted.**

STATEMENT OF EDUCATIONAL PURPOSE (Must be signed in-person)

I certify that I _____ am the individual signing this **Statement of**
(Print Student's Name)

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 _____ academic year.
(Name of Postsecondary Educational Institution) (Ex. 2019 - 2020 academic year)

Signature

Date

UH ID Number

NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT

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's Signature)

My commission expires on _____

RETURN THIS FORM ALONG WITH ANY OTHER REQUIRED DOCUMENTATION TO THE COMMUNITY COLLEGE CAMPUS THAT YOU WILL BE ATTENDING:

Community College	Address	Email	Phone
Hawai'i Community College	1175 Manono Street * Hilo, HI 96720	hawccfao@hawaii.edu	(808) 934-2712
Honolulu Community College	874 Dillingham Boulevard * Honolulu, HI 96817	honccfao@hawaii.edu	(808) 845-9116
Kapi'olani Community College	4303 Diamond Head Road * Honolulu, HI 96816	kapfao@hawaii.edu	(808) 734-9537
Kaua'i Community College	3-1901 Kaunualii Highway * Lihu'e, HI 96766	kauccfao@hawaii.edu	(808) 245-8360
Leeward Community College	96-045 Ala Ike Street * Pearl City, HI 96782	lccfao@hawaii.edu	(808) 455-0606
University of Hawai'i Maui College	310 West Ka'ahumanu Ave * Kahului, HI 96732	mauifa@hawaii.edu	(808) 984-3277
Windward Community College	45-720 Kea'ahala Road * Kane'ohe, HI 96744	wccfao@hawaii.edu	(808) 235-7449

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FAO USE ONLY

Documents reviewed: _____ FAO Signature: _____