

2024-2025 STATEMENT OF EDUCATIONAL PURPOSE

Office of Student Financial Assistance AC 416 Nunn Drive Highland Heights, KY 41099

| I. Student Information | |
|---|---|
| Name: | |
| NKU ID/SSN: | Date of Birth: |
| Address: | City: |
| State: Zip: | |
| | - Hone Ive.: |
| II. Statement of Educational Purpose | |
| If the student is unable to appear in person at Northern Kentucky University to verify his or her identity, the student must provide: | |
| (a) A copy of the 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(b) The original notarized Statement of Educational Purpose below. | |
| Statement of Educational Purpose | |
| I certify that I,, am the ind | ividual signing this Statement of Educational |
| (Print Student's Name) 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 Northern Kentucky University for the 2024-2025 academic year. | |
| | |
| STUDENT SIGNATURE: | Date: |
| Notary's Certificate of Acknowledgement | |
| State ofCity/County of | |
| On, before me, | Notan's Name |
| personally appeared, | |
| basis of satisfactory evidence of identification | to be the above-named person who |
| signed the foregoing instrument. | D Provided |
| WITNESS my hand and official seal | |
| (Seal) | Notary signature |
| My commission expires on: | |