



Samford University

2026-2027 Identity/Statement of Educational Purpose Form

Option 1: In-Person Presentation of Original Proof of Identity
(to be signed at Samford University)

The student must appear in person at Samford University to verify to provide proof of 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. If you are unable to appear in person, please complete option 2.

Documents received by email or fax will not be accepted.

Statement of Educational Purpose

I certify that I, _____, am the individual signing this Statement of Educational Purpose

(Print Student's full name)

and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Samford University for 2026-2027.

Student Signature (required): _____

Date: _____

SUID Number (required): _____

**STUDENT FINANCIAL SERVICES ONLY
ADVISOR**

Date: _____
(ID Photocopied)

Expiration dates (s) verified: _____
(Official's Initials)

RRAAREQ Updated

Grouping Completed (if applicable)

Copies Attached

Routed to Processing

(Institutionally Authorized Individual, printed name)

(Institutionally Authorized Individual Signature)

Processing Initials: _____

Date: _____

Option 2: In-Person Presentation of Original Proof of Identity to Notary Public Official
(to be signed with a Notary Public Office)

If the student is unable to appear in person at Samford University, to complete the Statement of Educational Purpose, the student must present an unexpired valid government-issued identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport as proof of identity to a Notary Public Official. The student must mail the original notarized statement and ID to Samford University One Stop.

Documents received by email or fax will not be accepted.

Statement of Educational Purpose

I certify that I, _____, am the individual signing this Statement of Educational Purpose
(*Print Student's full name*)

and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Samford University for 2026-2027.

Student Signature (required): _____ Date: _____

SUID Number (required): _____

List of Documents:

NAME OF VALID PHOTO ID	EXPIRATION DATE OF VALID PHOTO ID	ISSUING AUTHORITY OF VALID PHOTO ID

NOTARY CERTIFICATION OF ACKNOWLEDGEMENT
State of _____ City/County of _____ On _____, before me, _____ (date) _____ (Notary's printed name) personally appeared, _____ (printed name of signer) and provided me original citizenship/eligible non-citizenship documents and his/her unexpired government issued ID to photocopy. Notary Signature: _____ Commission Expires: _____

NOTARY OFFICIAL SEAL

Please mail this worksheet along with all required documentation to:
Samford University One Stop | 800 Lakeshore Drive, Birmingham, AL 35229 | Phone: 205-726-2905