

IDENTITY VERIFICATION

Your 2016–2017 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called identity verification. Federal regulations state that before awarding federal student aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. Complete and submit this form along with any required documentation to the <http://www.crookston.edu/identity>. Processing of your financial aid is on hold until this information is received.

Return this completed form to:

<http://www.crookston.edu/identity>
 1000 University Ave
 Crookston, MN 55016
 Phone: 763-255-5100
 Fax: 763-255-5109
 uidentity@umn.edu

Student Information	
Name (last, first, middle initial)	Student ID Number
Current Mailing Address (street, apt or PO box number, city, state, zip code, country)	Student SSN:
Campus Email	Preferred Telephone Number

Identity and Statement of Educational Purpose – Complete this section in person at the Student One Stop or with a notary public.

If you are unable to appear in person at the University of Minnesota Crookston to verify your identity, you must provide:

- (a) A copy of the valid government-issued photo identification (ID), 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 provided below.

Statement of Educational Purpose - I certify that I _____ am the individual signing 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 the University of Minnesota / <http://www.crookston.edu/identity> for 2016-2017.

Student Signature _____ Student ID Number _____ Date _____

Notary’s Certificate of Acknowledgement

Notary Printed Name _____ Notary Signature _____ Date _____

Notary Stamp/Seal: _____ My Commission Expires On _____

Certification and Signature(s)	
I/We certify that all of the information reported is complete and correct.	WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.
Student Signature	Date