# 2018-19 Identity and Statement of Educational Purpose (To Be Signed at the Institution)

The student must appear in person at <u>Minneapolis College of Art and Design</u> to verify their 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 that is annotated by the institution with the date it was received and reviewed 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 English or Spanish Statement:

### **Statement of Educational Purpose**

I certify that I	am the individual signing this
(Print Student's Name)	-
	nat the Federal student financial assistance tional purposes and to pay the cost of attending for 2018-19.
(Name of Postsecondary Educational Ins	stitution)
(Student's Signature)	(Date)
(Student's ID Number)	
Declaración de Prop	pósito Educativo
Certifico que yo,	, soy el individuo que firma esta
Declaración de Finalidad Educativa y que la pueda recibir, sólo será utilizada para fines e	
[Imprimir Nombre de Instituc	ión Educativa Postsecundaria]
[Firma del Estudiante]	[la Fecha]
[Número de Identificación del Estudiante]	

#### **Identity and Statement of Educational Purpose**

(To Be Signed With Notary)

**If** the student is unable to appear in person at <u>Minneapolis College of Art and Design</u> to verify their 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 (in English or Spanish) provided below.

## **Statement of Educational Purpose**

I certify that I	am the individual signing this		
	e and that the Federal student financial assistance educational purposes and to pay the cost of attending for 2018-19.		
(Name of Postsecondary Educatio	onal Institution)		
(Student's Signature)	(Date)		
(Student's ID Number)			
Certifico que yo,	de Propósito Educativo , soy el individuo que firma esta		
pueda recibir, sólo será utilizada para	que la ayuda financiera federal estudiantil que yo fines educativos y para pagar el costo de asistir a para 2017-18. Institución Educativa Postsecundaria]		
[Firma del Estudiante]	[la Fecha]		
Número de Identificación del Estudia	nte]		

# × MCAD

Sample of a Notary's Certific Notary's certification may vary by		vledgement	
State of			
City/County of			
On,	before me,		·
(Date)		(Notary's name)	
personally appeared,			, and proved to me
(Printed	name of signer	r)	
on basis of satisfactory evidence	ce of identificat	ion	
		(Type of governme	ent-issued photo ID provided)
to be the above-named person	who signed th	e foregoing instrumen	nt.
WITNESS my hand and offici	al seal		
,		(Notary	signature)
My commission expires on		· · · · · · · · · · · · · · · · · · ·	
(	Date)		

Return completed form to: MCAD Financial Aid Office

2501 Stevens Avenue Minneapolis, MN 55404 Fax: 612-874-3701

Email: financial aid@mcad.edu