

Student's Name:\_\_\_\_

Office of Financial Aid 3303 Rebecca St. Sioux City, IA 51104 (712) 279-5530 Financial.Aid@briarcliff.edu

\_Student ID:\_\_\_

## 2025-2026 Identity and Statement of Educational Purpose (V4 / V5)

Your 2025-2026 Free	Application for Federal Student	Aid (FAFSA) was s	elected for review in a process called verification.	
The law says that befo	re awarding Federal Student Aid,	, we must confirm tl	he information you reported on your FAFSA. If you	
have questions, contac	t your financial aid administrator	as soon as possible	so that your financial aid will not be delayed.	
Instructions:				
	: Bring (in person) to the Institut	tion's Financial Aid	Office the following:	
1.	Esting (in person) to the institution of institution of the institutio			
2.				
	1 8	1		
• Or: If you are unable to appear in person, submit the following to the Institution's Financial Ai				
1.			urpose (To Be Signed before a Notary)	
2.			photo identification (ID) that is acknowledged in	
	the notary statement below, or t	that is presented to a	notary, such as, but not limited to, a driver's	
	license, other state-issued ID, o			
	2025 2026 Idom4itas	and Statement o	f E du cotton al Duum acc	
			f Educational Purpose	
	(101)	Be Signed at the Inst	nution)	
The student mus	st annear in nerson at		to	
The student must appear in person at to (Name of Postsecondary Educational Institution)				
verify his or her	identity by presenting an unexpi	red valid governme	nt-issued photo identification (ID), such as, but	
			Γhe institution will maintain a copy of the	
student's photo	ID that is annotated by the institu	tion with the date it	t was received and reviewed, and the name of	
			dent's ID. In addition, the student must sign, in	
	the institutional official, the State			
	<b>Q</b>	45. d lb		
		f Educational Purp		
I ce	rtify that I,(Print Student's		, am the individual signing	
	(Print Student's	s Name)		
this Statement of Educational Purpose and that the Federal student financial assistance				
I ma	y receive will only be used for ed	lucational purposes	and to pay the cost of attending	
			for 2025–2026.	
	(Name of Postsecondary Educ	cational Institution)	101 2025 2020.	
	(I wante of I observe and I have			
(Stu	dent's Signature)	(Date)	(Student's ID Number)	
Stud	lent signature was witnessed by	and the Student P	Photo ID was reviewed by:	
	•			
(Inst	titution Official's Signature)	(Date)	(Printed Name of Official)	
(III)	3 ~ <b>.g</b> )	(- ====)	(	
Atta	ach a copy of the student's photo	o ID annotated wit	th the date it was reviewed and the	
nam	ne of the Institutional Official th	nat reviewed it to tl	his form.	

## 2025-2026 Identity and Statement of Educational Purpose

(To Be Signed with Notary)

If the student is unable to appear in person at the institution to verify his or her identity, the student must provide to the institution:

- A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to a driver's license, other state-issued ID, or passport; and
- The original notarized Statement of Educational Purpose provided below.

The student's signature must be witnessed by and the student's original photo ID must be reviewed by the Notary.

Sta	tement of Educational	Purpose
I certify that I,(Print Stu	dent's Name)	_, am the individual signing
this Statement of Educational Polymay receive will only be used		eral student financial assistance s and to pay the cost of attending
		for 2025–2026.
(Name of Postsecondary	Educational Institution	
(Student's Signature)	(Date)	(Student's ID Number)
Notar	y's Certificate of Ackn	owledgement
State of		
City/County of		
On	, before me	
(Date)		(Notary's name)
Personally appeared,	(Printed name of sig	and proved to me
Recause of satisfactory evide	nce of identification	
Because of satisfactory evides	(Ty)	pe of unexpired government-issued
to be the above-named person	who signed the foregoi	photo ID provided) ng instrument.
WITNESS my hand and off (seal)	icial seal	
(2327)		(Notary signature)
My commission expires on _		
	(Date)	