

2026-2027 IDENTIFICATION/STATEMENT OF EDUCATIONAL PURPOSE

FSU Office of Scholarships & Financial Aid
1201 S. State Street, CSS 101, Big Rapids, MI
49307 Phone: 231 591-2110

FIRST NAME_____
MIDDLE_____
LAST_____
Phone Number_____
Student ID #_____
Permanent Address (include Apt. Number)_____
City_____
State_____
Zip Code

STUDENT INSTRUCTIONS: If you are unable to appear in person at Ferris State University Main Campus or Kendall College of Art & Design, then please print this form and take it to a licensed notary public with one of the forms of acceptable identification listed below. **DO NOT FILL OUT OR SIGN ANY PART OF THIS FORM UNTIL YOU ARE IN THE PRESENCE OF THE NOTARY PUBLIC.** Once this form has been notarized, you must mail the form AND a photocopy of the identification you presented to the Notary Public, to: Ferris State University Office of Scholarships and Financial Aid, 1201 S State Street, CSS101, Big Rapids, MI 49307. Student is responsible for any applicable notary fees. **THIS FORM MAY NOT BE FAXED OR EMAILED.**

ACCEPTABLE FORMS OF IDENTIFICATION: NOTE – “VALID” MEANS CURRENT, NOT EXPIRED.

- Valid Driver's License with photo
- Valid passport with photo
- Valid Permanent Resident Card with photo
- Valid State Identification Card with photo

Statement of Educational Purpose

I certify that I _____ am the individual signing this
(Print Student's Name)

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 Ferris State University for 2026-2027.

(Student's Signature)_____
(Date)_____
(Student's ID Number)

Notary's Certificate of Acknowledgment

State of _____ City/County of _____

(Date)

On _____, before me, _____, personally appeared, _____, and proved
(Printed Name of Notary) (Printed Name of Signer)

to me on basis of satisfactory evidence of identification _____ to be the above-named person who signed the foregoing instrument.
(Type of government-issued photo ID provided)

WITNESS my hand and official seal

Notary Signature _____ Date _____

My commission expires on _____