

Verification Form Identity & Statement of Educational Purpose 2025-26

Your 2025-26 FAFSA was selected for verification of Identity and Educational Purpose. To fulfill the of this requirement, you must complete front and back the form in person at the Financial Aid Office. A valid government issued form of identification will be required.

If you are unable to complete this form in person, please provide the following to the Financial Aid Office:

- Copy of a government-issued photo identification, such as driver's license, passport, or military ID
- This original form completed in the presence of a notary public (see reverse side)

STUDENT INFORMATION

| Last name | name First Name | | RMU ID | | |
|--|------------------|---------------------|---|--|--|
| Address (include apt. no.) | | | Date of Birth | | |
| City | State | ZIP Code | Phone Number | | |
| Statement of Edu | cational Purpose | | | | |
| I certify that I | | | am the individual signing this Statement of | | |
| Educational Purpo | ose and that the | federal student fin | nancial assistance I may receive will only be | | |
| used for educational purposes and to pay the cost of attending Robert Morris University for 2025-26. | | | | | |
| | | | | | |
| Print Name | | | Date | | |
| Student Signature_ | | | RMU ID# | | |

| 0 | | | | |
|---|------|---|----|---|
| | Page | 2 | of | 2 |

| State of | City/County of | on, |
|-----------------------|-----------------------------------|---|
| before me, | Name of Notary Public | , personally appeared |
| | Name of Notary Public , and pr | ovided to me on the basis of satisfactory evidence o |
| Printed Nar | | to be the above named narrows who signed th |
| | Type of ID Provided | to be the above-named persona who signed the s |
| foregoing instrument. | Type of b fronded | |
| | | Witness my hand and official seal (seal) |
| Signatu | re of Notary Public | |
| Commission expires on | | |

CERTIFICATION

Notary Certificate of Acknowledgment

By signing below, I certify that all of the information reported to qualify for Federal student aid is complete and accurate.

Student Signature

Do Not Write Below This Line

FOR OFFICE USE ONLY

If student appeared in person, to be completed by a member of the Financial Aid staff:

FINANCIAL AID STAFF:

SIGNATURE:

DATE STUDENT APPEARED IN PERSON:

Date