

EDGEWOOD COLLEGE FINANCIAL AID

(P) 608-663-4300 | (F) 608-663-3495 | ecentral@edgewood.edu | 1000 Edgewood College Dr., Madison, WI 53711

2024-2025 Statement of Educational Purpose & Proof of Identity

SUBMIT IN PERSON:

- Bring government issued photo ID to Edgewood Central (210 DeRicci Hall)
- Sign in the presence of an Edgewood Central Staff member

SUBMIT BY MAIL:

- Sign in the presence of an Official Notary
- Mail BOTH this statement and a copy of the government issued photo ID that was presented to the Notary

	State	ment of Educational F	Purpose
Print stu	dent's name assistance I may receive will		ng this Statement of Educational Purpose and that the ional purposes and to pay the cost of attending
= -	resence of an Edgewood Cent resence of an Official Notary	Date ral Staff member	Edgewood ID#
(if submitting BY MA TO BE COMPELETED BY	AIL <u>ONLY</u>) Notary's Certi AN OFFICIAL NOTARY	ficate of Acknowled	gement
State:	City/County:		
On , l	pefore me,	, 1	personally appeared
Date	Notary's Name		Printed name of signer
And provided to me on b	pasis of satisfactory evidence		of government-issued photo ID provided
To be the above-named	person who signed the foreg	oing instrument.	
WITNESS my hand and o	fficial seal		
	Notary signature		
{SEAL}	My commission e	xpires on:	
OFFICE USE ONLY The documentation	presented to verify the stu	dent's identity is:	
Documentation rece			nd signed by Edgewood Central Staff
2 3 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	_		notarized and copy of Government ID received
I verify that I am an i		•	en the documentation stated above.
Signature		 Title	