

Please complete this form online, then print and sign using blue or black ink.

IDEN



STUDENT NAME: _____
WIN: _____
DAYTIME PHONE: _____
ADDRESS: _____
CITY, STATE, ZIP: _____

WMU Student Financial Aid
1903 W Michigan Ave
Kalamazoo MI 49008-5337
(269) 387-6000
finaid-info@wmich.edu

2017-18 IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

The student must appear in person at Western Michigan University to verify his or her 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 with the date it was received 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:

Statement of Educational Purpose

I certify that I, _____, am the individual signing this Statement
Print Student's Name

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 Western Michigan University for 2017-18.

STUDENT SIGNATURE: _____ **DATE:** _____

NAME OF WMU OFFICIAL: _____ **DATE:** _____

SIGNATURE: _____ **ID COPIED AND ATTACHED:** _____

**Return your completed form to Bronco Express on the lower level of the Bernhard Center.
Be sure to include your name and WIN on all pages. Missing information may delay the processing of financial aid.**