



2025 – 2026 Identity and Statement of Educational Purpose

(To Be Signed at the Institution)

Student's Last Name

First

Student's Identification (ID) Number

Student's Street Address (include apt. no.)

Student's Phone Number

City

State

Zip Code

Student's Email Address

The student **must appear in person** at Fairfield's Office of Financial Aid to verify his or her identity by presenting an **unexpired** valid government- issued photo identification (ID), such as, but not limited to:

- a **driver's license**,
- other **state-issued ID**
- Or **passport**

Fairfield University will maintain a copy of the student's photo ID that is annotated with the date it was received and reviewed, and the name of the university official authorized to receive and review the student's ID.

In addition, the student must sign, in the presence of the university official, the following statement:

Statement of Educational Purpose:

I certify that I _____ am the individual signing this *Statement of Educational Purpose*
(Print Student's Name)

and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending **Fairfield University** for 2025-2026.

Student's Signature

Date

University Official Signature

Date

WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.