| | | W00 | | | |
|---|---|-----------------------|--------------------|--|--|
| Last Name | First | M.I. | Student I.D. | | |
| Address | City | State | Zip Code | Phone Number | |
| • • • | or Federal Student Aid (FAFSA) w dentity and sign a Statement of | | • | Department of Education. You are | |
| identification (ID), such a copy of your photo ID | as, but not limited to, a driver's | license, other state | e-issued ID, or pa | a valid government-issued photo assport. The institution will maintain nd reviewed and the name of the | |
| In addition, you must sig | gn, in the presence of the institu | utional official, the | Statement of Ed | ucational Purpose provided below. | |
| | | | | | |
| | | | | ged in the notary statement below or state-issued ID, or passport; and | |
| appears on a se | | nt of Educational P | | notarized. If the notary statement ust be a clear indication that the | |
| | | | | | |
| I certify that I(Print Student's Name) | | am th | e individual sigi | ning this Statement of Educational | |
| • | Federal student financial assi attending Wilmington Unive | _ | - | e used for educational purposes | |
| (Student's Signature) | | Date) | (Student's I | D Number) | |
| Parent's signature (Require | ed for Dependent Students) | Dat | e | | |

| Student Name | WilmU ID# |
|----------------|--|
| | Notary's certification may vary by State |
| State of | |
| City/County of | |
| On | |