



2023-2024 Identity and Statement of Educational Purpose

Office of Graduate Financial Aid
Phone: (714) 628-2730
gradfinaid@chapman.edu

Your 2023-2024 Free Application for Federal Student Aid (FAFSA) was selected for a verification review. To verify that you provided correct information on your FAFSA, we will compare it with the information on this document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. Please complete and sign this form and submit with any other required documents. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

A. Student's Information

STUDENT NAME

ID NUMBER

STUDENT STREET ADDRESS (INCLUDE APT. NO.)

STUDENT DATE OF BIRTH

CITY, STATE, ZIP CODE

STUDENT EMAIL ADDRESS

STUDENT HOME PHONE NUMBER (INCLUDE AREA CODE)

STUDENT DAY TIME NUMBER (INCLUDE AREA CODE)

B. Identity and Statement of Educational Purpose

The student must appear in person at Chapman University to verify 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 (military IDs **not** accepted). 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, _____,
(print student's name)
am the individual signing this Statement of Educational Purpose form and that the federal student financial assistance I may receive will only be used for educational purposes to pay the cost of attending Chapman University for 2023-2024.

STUDENT SIGNATURE

DATE

CERTIFICATION: All of the information on this form is true and complete to the best of my knowledge. If asked by the Office of Graduate Financial Aid, I agree to provide proof of the information that I have given on this form. I realize that purposely giving false or misleading information on this form may result in reduced eligibility and/or repayment of aid.