



Rhode Island School of Design
2023-2024 Statement of Identity and Educational Purpose
Student Financial Services
f: (401) 454-6412 e: sfs@risd.edu

Rhode Island School of Design Identity and Statement of Educational Purpose
Award Year 2023-2024
(To Be Signed at the Institution)

The student must appear in person at the Student Financial Services Office at the Rhode Island School of Design 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.

Address: Student Financial Services
20 Washington Place, 1st Floor
Providence, RI 02906

Office Hours: Monday-Friday 8:30 to 4:30pm

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 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 Rhode Island School of Design for 2023-2024.

(Student's Signature)

(Date)

(Student's ID Number)



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**Identity and Statement of Educational Purpose
Award Year 2023-2024
(To Be Signed With Notary)**

If the student is unable to appear in person at Rhode Island School of Design to verify his or her identity, the student must provide:

- (a) A copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to a driver’s license, other state-issued ID, or passport; and
- (b) The original notarized Statement of Educational Purpose provided below.

Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement 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 Rhode Island School of Design for 2023-2024.

(Student’s Signature) (Date)

(Student’s ID Number)

Notary’s Certificate of Acknowledgement

State of _____

City/County of _____

On _____, before me, _____,
(Date) (Notary’s name)

personally appeared, _____, and provided to me
(Printed name of signer)

on basis of satisfactory evidence of identification _____
(Type of government-issued photo ID provided)

to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal
(seal)

(Notary signature)

My commission expires on _____
(Date)