

2024–2025 Institutional Verification Document (Statement of Educational Purpose Form)

Your 2024–2025 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called Verification. As a result, you are required to confirm the information you reported on your FAFSA. Kent State will compare your FAFSA with the information on this institutional verification document and other required documents. If there are discrepancies, your FAFSA information will be corrected. You must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to us. We may ask for additional information. If you have questions about Verification, contact us as soon as possible so that your financial aid will not be delayed.

A. Student's informa	tion		
Student's Last Name	First Name	M.I.	Kent State ID Number
Student's Street Address	s (include apt. no.)		Student's Date of Birth
City	State	Zip Code	Student's Email Address
Student's Home Phone Number (include area code)			Student's Alternate or Cell Phone Number
identification (ID) such a maintain a copy of the s	as, but not limited to, a tudent's photo ID that i of the official at the in	driver's license, ot is annotated by the stitution authorize	g an unexpired valid government-issued photo her state-issued ID, or passport. Kent State will institution with the date it was received and d to receive and review the student's ID. In addition, the following:
	Stat	ement of Educatio	nal Purpose
that the Federal student		nay receive will onl	ual signing this Statement of Educational Purpose and y be used for educational purposes and to pay the
cost of attending Kent S	tate University for 2024	I–2025.	
Student's Signature		 Date	Kent State ID Number

Financial, Billing and Enrollment Center

◆ Kent State University

P.O. Box 5190

◆ Kent, Ohio 44242

C. Certifications and Signatures		
By signing below, I certify that all reported information is complete and correct.	WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.	
Print Student's Name	Kent State ID Number	
Student's Signature	 Date	
You must sign this form with your original ink signature, in the turn in your form after it is completed with the institutional or faxed copy of your signature or this form.		
Financial, Billing and Enrollment Center I certify that the student signed Section B: Statement of Education Signature.		
☐ Copy of ID Made		

Financial, Billing and Enrollment Center • Kent State University P.O. Box 5190 • Kent, Ohio 44242

Date: _____

Staff Initials: _____