

Statement of Educational Purpose & Proof of Identity 2025-2026

Instructions:

Your 2025-2026 Free Application for Federal Student Aid (FAFSA) was selected for verification, a federally mandated process to confirm the accuracy of the information reported on your FAFSA. To complete this process certain documents and information are required for the School of Medicine Office of Financial Aid to review prior to the determination of federal aid eligibility or the release of that aid.

Note: This document must be submitted in person. Electronic copies can only be accepted if notarized.

You are required to submit this form and supporting documentation directly to the School of Medicine Office of Financial Aid for processing. Please upload the completed form and supporting documentation online by logging into the My Financial Aid Portal, clicking on the 'Menu' in the upper left corner, clicking on the 'Documents and Messages' option to locate the Statement of Educational Purpose upload. If you have any questions, please contact our office at medfinancialaid@case.edu.

If you have any questions, please feel free to contact us at medfinancialaid@case.edu or call 216-368-3666.

Forms required to complete this process:

1. Statement of Educational Purpose (1 page) - *Submitted in person, unless notarized*
2. Proof of Identity using an unexpired valid, government-issued photo identification such as, but not limited to, a driver's license, other state-issued ID, or passport - *Original document is required when the form is completed, whether in person or notarized. A copy of the document will be made when completed in person, or must be submitted with the notarized statement.*

Statement of Educational Purpose & Proof of Identity

Student's Last Name	Student's First Name	MI	SIS/PeopleSoft Student ID (1234567 or abc123)
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Section #1 - To be completed in person if you are able to appear to a CWRU Financial Aid Officer

You can appear in person at the CWRU Office of University Financial Aid to verify your 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. The institution will maintain a copy of your photo ID that is annotated by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review your ID.

In addition, you must sign, in the presence of the institutional official, the State of Educational Purpose provided below.

Statement of Educational Purpose

I certify that I _____ (Student's name) am the individual signing this Statement of Educational Purpose and that the federal student financial aid assistance I may receive will only be used for educational purposes and to pay the cost of attending Case Western Reserve University for 2025-2026.

Student's signature	Date
Financial Aid Officer's signature	Date

Section #2 - To be completed in the presence of a notary if you cannot appear to a CWRU Financial Aid Officer in person

If you are unable to appear in person at the CWRU Office of University Financial Aid to verify your identity, you must provide **both** of the following:

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

Statement of Educational Purpose

I certify that I _____ (Student's name) am the individual signing this Statement of Educational Purpose and that the federal student financial aid assistance I may receive will only be used for educational purposes and to pay the cost of attending Case Western Reserve University for 2025-2026.

Student's signature	Date
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Notary's Certificate of Acknowledgement

State of _____ City/County _____
 On ___/___/___, before me _____ (Notary's name) personally appeared,
 _____ (Student's name) and provided to me on the basis of satisfactory evidence of
 identification _____ (Type of government issued photo ID) to be the above named person
 who signed the foregoing instrument.

WITNESS my hand and official seal

My commission expires on ___/___/___

Notary's signature _____ Date ___/___/___

