

**2023-2024 Identity and Statement of Educational Purpose  
(To Be Signed at the Institution)**

_____	_____	_____
Last Name	First Name	CSU ID #
(____)_____	(____)_____	
Phone Number (Home)	Phone Number (Cell)	

You are required to appear in person at Cleveland State University, in the offices of Campus 411 All-in-1, to verify your identity. You **MUST** present 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 university will maintain a copy of your photo ID. **No e-mail or faxed documents can be used to satisfy verification requirements for the Statement of Educational Purpose.**

In addition, you **must** sign this form in the presence of the institutional official.

**Statement of Educational Purpose**

I certify that I \_\_\_\_\_ am the individual signing this Statement of Educational Purpose and that the  
(Print Name)

Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending

Cleveland State University for 2023-2024.

\_\_\_\_\_  
\*(Student’s Signature) CSU ID Number (Date)

\_\_\_\_\_  
\*Institutional Official (Signature) Date

\_\_\_\_\_  
Institutional Official (Print Name)

\*Note: This form must be signed with a physical signature. Typed names or electronic signatures are not acceptable and will delay processing\*

**\*\*Institutional official please remember to sign and date the copy of the valid government-issued photo I D\*\***