



**Financial Aid Office**  
2121 Euclid Avenue, Cleveland, OH 44115  
Phone 216-687-5411

**2024-2025 Identity and Statement of Educational Purpose  
(To Be Signed at the Institution)**

_____ Last Name	_____ First Name	_____ CSU ID #
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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 2024-2025.

\_\_\_\_\_  
\*(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\*\***