UNIVERSITY OF NORTH CAROLINA SCHOOL OF THE ARTS

A. Student Information

Last name	First name	M.I.	E-Z Arts ID #
Address (include apt. no.)		<u> </u>	Date of birth
City	State	ZIP code	Phone number (include area code)

B. Identity

You must appear in person at the **University of North Carolina School of the Arts** to verify your 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 University of North Carolina School of the Arts will maintain a copy of your 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.

C. Statement of Educational Purpose

You must sign, in the presence of a University of North Carolina School of the Arts official. *

I certify that I______am the individual signing this **Statement of Educational Purpose**(Print Student's Name)

and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending the **University of North Carolina School of the Arts** for 2024–2025.

(Student's Signature)

(Date)

* **If you cannot appear in person at UNCSA**, you must present your valid government issued photo identification to a notary and sign the statement above in their presence. Send the original, notarized Identity & Statement of Educational Purpose Form AND a legible photocopy of the Photo ID you presented to the notary by mail to:

Office of Student Financial Aid, UNC School of the Arts, 1533 South Main Street, Winston Salem, NC 27127

Notary's Certificate of Acknowledg	gment:		
State of:	City/County of:		
(Student's Name)	personally appeared before me and proved t	to me via valid government issued	
<i>identification</i> ,(Type of ID pre	, to be the above-named person who signed the foregoing instrument. nted)		
(Notary Signature)	(Date))	
My commission expires on the follo	owing date:		