

Financial Aid Office

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Baltimore MD 21205

Email: [HTTPS://Support.SIS.jhu.edu/case/](https://support.sis.jhu.edu/case/)

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PLEASE RETURN THIS COMPLETED FORM VIA POSTAL MAIL ONLY

2022-2023 Identity and Statement of Educational Purpose (To Be Signed with Notary)

Your 2022-2023 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before disbursing Federal Student Aid, you must confirm the information you reported on your FAFSA. To verify that you provided correct information the financial aid administrator at your school will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your school may ask for additional information. If you have questions above verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

WARNING: Anyone who purposely gives false or misleading information on this worksheet may be fined, sentenced to prison or both.

Student's Printed Name

Student's ID Number

Instructions:

If the student is unable to appear in person at **Johns Hopkins University Bloomberg School of Public Health** to verify his or her identity, the student must provide:

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

Statement of Educational Purpose

I certify that I, _____ am the individual signing this Statement of Educational Purpose and that
(Print Student's Name)

the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending the **Johns Hopkins University Bloomberg School of Public Health** for 2022-2023.

Certification and Signatures

Each person signing this worksheet certifies that all the information reported on it is complete and correct. This worksheet must be signed by the student.

Student's Signature

Date

Notary's Certificate of Acknowledgement

State of _____

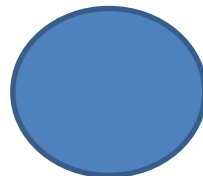
City/County of _____

On _____, before me, _____ personally appeared, _____
Date (Notary's Name) (Printed name of signer)

and provided to me on basis of satisfactory evidence of identification _____
(Type of government issued unexpired photo ID)

to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal



(affix seal here)

(Notary Signature)

My commission expires on _____
(Date)