



2024-2025

FINANCIAL AID
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Marquette, MI 49855-5301
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fao@nmu.edu | nmu.edu/finaid

Original signatures required.
This document cannot be faxed.

Student Name _____ NMU IN _____

Office Use:	Date Stamp:
Date stamp and signature of staff member verifying identity:	
Staff Signature: _____ (Be sure to sign and date copy of ID as well)	

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

The student must appear in person at NORTHERN MICHIGAN UNIVERSITY to verify his or her
(Name of Postsecondary Educational Institution)

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 the student's 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 the student's ID.

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

Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement
(Print Student's Name)

of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending NORTHERN MICHIGAN UNIVERSITY for 2024-2025.

(Name of Postsecondary Educational Institution)

(Student's Signature) (Date)

(Student ID Number)