11066 Auke Lake Way Juneau, AK 99801 • Tel: (907) 796-6255 • Fax: (907) 796-6250 • <u>uas.finaid@alaska.edu</u>

Name		Student ID
Phone		Date of Birth
This document m	nust be signed in person of the design of th	tity and Educational Purpose with photo identification at the Financial Aid Office OR tary public and must be the original document. a copy of the notarized document.
•	e and that any federal student a	, am the individual signing this Statement of Identity and I may receive will be used only for educational purposes to pay the and allowable living expenses for the 2023-2024 academic year.
Student Signature		Date
and the name of FAO Signature	the staff member who was authori	py of an annotated student's photo identification with the date it was received zed to receive it. Date id Office, this document must be notarized by a commissioned
notary public. Use the	e space below for the notarial c ch as but not limited to state-iss	sertificate and attach a legible photocopy of your government-issued sued ID, driver's license, or passport. If notarized, you must mail in
STATE OF	DATE	Place Seal Here:
TO BE THE SIGNER (APPEARED BEF AVE VERIFIED ON THE BA OF THIS APPLICATION AND HAT HE/SHE SIGNED IT.	(TYPE OF PHOTO ID)