



Statement of Educational Purpose

Verification requires that our office collect proof of your identity.
Please provide a valid government-issued photo ID and a statement
regarding your educational purpose.

I certify that I, _____, am the individual signing this Statement of
Student Name (Print)
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 Lac Courte Oreilles Ojibwe University for the 2023-2024 School Year.

Student Signature: _____

Date: _____

Student ID Number: _____

WARNING: If you purposely give false or misleading information, you may be fined, sentenced to jail, or both.

Witnessed by Financial Aid Staff or Notary:

Name (Please Print): _____

Signature: _____

Date: _____

Attach a copy of your valid government-issued photo ID