

**2023-2024 IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE**  
TO BE SIGNED AT THE INSTITUTION

**STUDENT INFORMATION**

_____ <i>Last Name</i>		_____ <i>First Name</i>		_____ <i>Student ID</i>		_____ <i>Date of Birth</i>	
_____ <i>Street Address</i>			_____ <i>City</i>		_____ <i>State</i>		_____ <i>ZIP</i>
_____ <i>Student's Phone Number</i>		_____ <i>Student's E-Mail Address</i>			_____ <i>Best Way to Contact Student</i>		
_____ <i>Parent(s)' Phone Number</i> <i>(if applicable)</i>		_____ <i>Parent(s)' E-Mail Address</i> <i>(if applicable)</i>			_____ <i>Best Way to Contact Parent</i> <i>(if applicable)</i>		

I, \_\_\_\_\_, verify that the student named above has appeared in person at the **Massachusetts College of Art and Design** and verified their identity by presenting a valid government-issued photo identification (ID) such as, but not limited to, a driver's license, or other state-issued ID, or passport. **A copy of the student's photo ID is attached.**

\_\_\_\_\_  
Signature of Authorized Official Date of Review

**STATEMENT OF EDUCATIONAL PURPOSE**

I certify that I, \_\_\_\_\_, am the individual signing this *Statement 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 **Massachusetts College of Art and Design** for 2023-2024.

\_\_\_\_\_  
Student's Signature Student ID No. Date

**DECLARACIÓN DE PROPÓSITO EDUCATIVO**

Certifico que yo, \_\_\_\_\_, soy el individuo que firma esta *Declaración de Finalidad Educativa* y que la ayuda financiera federal estudiantil que yo pueda recibir, sólo será utilizada para fines educativos y para pagar el costo de asistir a **Massachusetts College of Art and Design** para 2023-2024.

\_\_\_\_\_  
Firma del Estudiante Número de Identificación del Estudiante la Fecha