



Oral Roberts University
Office of Financial Aid

**STATEMENT OF
EDUCATIONAL PURPOSE
Resident or Commuter
Student
(2014-2015)**

Student Name: _____ Student Z# _____

The student must appear in person at ORU (Oral Roberts University) to verify his or her identity by presenting 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 with the date it was received and the name of the official at the institution authorized to collect the student's ID.

In addition, the student must sign, in the presence of the institutional official, the following:

Statement of Educational Purpose

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

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 ORU (Oral Roberts University) for 2014-2015

Student's Signature

Date

Financial aid use only:

I hereby bear witness that the above student, based on valid *government-issued photo identification*, signed this Statement of Educational Purpose in front of a Financial Aid Representative.

Financial Aid Representative's Signature

Date