

2016-2017 Identity and Statement of Educational Purpose

The student must appear in person at Colorado State University-Pueblo 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. Colorado State University-Pueblo 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 Colorado State University-Pueblo authorized to collect the student's ID. In addition, the student must sign, in the presence of the institutional official, the following:

		-
		am the individual signing this
		assistance I may receive will only be used for niversity-Pueblo for the 2016-2017 academic year.
Student's Signature	PID	Date Signed
Signature of CSUP staff member	Date Collected	
following: A copy of a valid government-iss This original notarized statement of this form will not be accepted per fed	ued photo identification (driv of educational purpose signed leral regulations.	red to provide Colorado State University-Pueblo with the er's license, other state-issued ID, or passport); and d by the applicant. Copies, emails and/or fax (facsimile)
State of		
City/County of		
On, before me,		, personally appeared,
(Date)	(Notary's name)	me on the basis of satisfactory evidence of
(Printed name of signer)		
identification(Type of government-issu	to be the above ted photo ID)	-named person who signed the
foregoing instrument.		
WITNESS my hand and official seal (seal)		
		(Notary Signature)
My commission expires on	·	
THIS FORM CANNOT BE FAXED Colorado State University-Pueblo Financial Aid Office 2200 Bonforte Blvd Pueblo, CO 81005 Phone: (719)549-2753	OR EMAILED. Federal	Regulations require the original document.

SECTION C: Child Support Paid Information

Did you and/or your spouse **PAY Child Support in 2015**?

____ No – GO TO SECTION D

Yes – Complete the table below. (**DO NOT INCLUDE CHILD SUPPORT RECEIVED!!**)

Name of the Person Who Paid Child Support	Name of the Person to Whom Child Support was Paid	Name of Child for Whom Support Was Paid	Amount of Child Support Paid in the Calendar Year 2015
			\$ \$

If you answered YES:

Please provide documentation showing proof of the amount paid for each child.

SECTION D: FOOD STAMP BENEFITS-CALENDAR YEAR 2015?

Complete this section if you received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly called Food Stamps) any time during the 2015 calendar year.

Yes, I did receive SNAP benefits during the 2015 calendar year.
If yes, please provide a printout from the State proving you received these benefits.

_____No, I did <u>NOT</u> receive SNAP benefits during the 2015 calendar year.