

2025-2026 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>Phone / E-Mail (Circle One)</i>	
_____		_____		_____	
<i>Student's Phone Number</i>	<i>Student's E-Mail Address</i>		<i>Best Way to Contact Student</i>		
_____		_____		_____	
				<i>Phone / E-Mail (Circle One)</i>	
_____		_____		_____	
<i>Parent(s)' Phone Number (if applicable)</i>	<i>Parent(s)' E-Mail Address (if applicable)</i>		<i>Best Way to Contact Parent (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 2025-2026.

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 2025-2026.

Firma del Estudiante Número de Identificación del Estudiante la Fecha