LAKE SUPERIOR STATE UNIVERSITY

2026-2027 Identity and Statement of Educational Purpose (To Be Signed at the Institution)

Student Name	**ID #**

Please complete form in blue or black ink. Incomplete forms will not be accepted.

You, the student, must appear in person at Lake Superior State University to verify your identity by presenting a valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. Lake Superior State University will maintain a copy of your photo ID that is annotated by the institution with the date it was received and reviewed and the name of the official at the institution authorized to collect the student's ID.

_____ _____

Student's Signature & ID # Date

Certifications and Signatures

Each person signing below certifies that all of the information reported to LSSU is complete and correct.

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

Print Student Name:_____ Student's Signature:_____	Date:

OFFICE USE ONLY

Documents Reviewed By:

- ❑ **Driver's License**
- ❑ **Passport**
- ❑ **State-Issued ID**
- ❑ **Other (specify)**

_____ _____

Financial Aid Officer Date

Internal use **ONLY**
Reviewed:_____
Scanned: _____
IDNTY-V8A