

**2026-2027**

**Identity  
Verification**

SEP

**SOUTHERN ILLINOIS UNIVERSITY  
EDWARDSVILLE**

**Student Financial Aid**  
2308 Rendleman Hall Campus Box 1060  
Edwardsville, IL 62026-1060  
Phone: (618) 650-3880 Fax: (618) 650-3885  
Email: [finaid@siue.edu](mailto:finaid@siue.edu) Homepage: [www.siue.edu/financial-aid](http://www.siue.edu/financial-aid)

Student Name \_\_\_\_\_ Univ. ID # \_\_\_\_\_

**Identity Verification**

**(To Be Signed with Notary or SIUE Student Financial Aid Staff Member)**

If you are unable to appear in person at the Office of Student Financial Aid (OSFA) at Southern Illinois University Edwardsville to verify your identity, you must have this form **signed by a Notary**. Then you must **hand deliver** or **Mail** using the U.S. Postal Service or courier service (e.g., FedEx, UPS, etc.). Additionally, **you must provide**:

- 1) A **copy of a valid government issued photo identification**, such as but not limited to, a valid driver's license, state issued ID, or passport; **and**
- 2) The original (not faxed nor emailed) notarized Identity Verification Form

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**Notaries or SIUE Student Financial Aid Staff Member's  
Certificate of Acknowledgement**

State of \_\_\_\_\_ City/County of \_\_\_\_\_

On this date \_\_\_\_\_, before me (Notary's or SIUE SFA staff member's name; please print legibly)

\_\_\_\_\_, personally appeared (student name) \_\_\_\_\_,

and provided to me on basis evidence of identification (list type of government issued ID) \_\_\_\_\_

to be the person who signed the foregoing instrument.

**WITNESS my hand and official seal** (Notary **or** SIUE SFA Staff Signature) \_\_\_\_\_

My commission expires on \_\_\_\_\_ (date).  
(Notary Only)

**This ORIGINAL document must be mailed or hand delivered to the Office of Student Financial Aid at the address above.**

**\*\*\*\*Please note, if you email or fax this document, it will be marked as Incomplete, and there will be a delay in your Financial Aid. \*\*\*\***