

## Office of Financial Aid

E finaid@findlay.edu P 419-434-4791

Date

## 2026-2027 Identity Verification Form

Student Name	Uni	versity ID (UID)
	cation (ID) such as but not limited to a	rification of identity <b>and must submit this form along with an unex-</b> driver's license, other state-issued ID, or passport. If you have que
I certify that I, Form and that I will be attending	g the <b>University of Findlay</b> for the 20	am the individual signing this Identity Verification 026-2027 academic year.
(Student's Signature)	(Dat	<u></u> <u>2</u> )
(UF Representative, if presented in	person) (Dat	<u></u>
(b) The original notarized Identity Verifo	Notary's Certificate of Ackn	owledgement
State of	•	//County of
(Date)	fore me,(Notary's name)	
personally appeared,	(Printed name of signer)	, and provided to me on basis of satisfactory
	, ,	to be the above-named person who
signed the foregoing instrument		.o ib provided)
WITNESS my hand and official (seal)	seal (Notary signature)	<del></del>
	My commission expire	s on