Educational Purpose Worksheet Off Campus 2024-2025



Financial Aid Office 1700 SW College ● Topeka, KS 66621 (785) 670-1151 ● (785) 670-1079 fax washburn.edu/financial-aid ● financialaid@washburn.edu

Student Name	WIN			
The student must provide to	the institution:			
	pired valid government-issue s presented to a notary, such a			
appears on a separate pag	nent of Educational Purpose pethan the Statement of Educa Purpose was the document no	ational Purpose, th		•
Statement of Educational Pu	rpose			
I certify that I	am th	e individual signing	this Statement of Educat	tional Purpose and
Print Stude (Print Student file) (Print Student file)	^{nt's Name)} nancial assistance I may receiv	ve will only be used	d for educational purpose	s and to pay the cost
of attending	for 2024-2025.			
(Print Institution) (Print Institution) (Print Institution)	on Name)			
I certify that all of the information of the inform	•	information	If you purposely give false or n on this worksheet, you may b to jail, or both.	_
Student's Signature		Date		_
Notary's Certificate of Ackno	wledgement			
State of	City/County of			_
On	, before me,		,	
(Date) personally appeared,	·	(Notary's name), and pr		
because of satisfactory evi	(Printed name of signer) dence of identification (Type of gr		rovided and, if applicable, the number)	
to be the above-named pe	rson who signed the foregoin		rovided and, if applicable, the hambery	
WITNESS my hand and off (seal)	icial seal			
		(Notary signatu	re)	
	My commission	expires on		