2025-2026 Identity and Statement of Educational Purpose

Student's Last Name	Student's Fi	rst Name	MI	Student's SSN or ID Number
Student's Email A	ddress Stu	ident's Phone Nui	mber	Student's Date of Birth
This Statement of Education	nal Purpose is <u>ONLY</u> to be	completed in pe	erson at tl	ne Institution or in front of a Notary.
(Complete this section		Statement of Educational Purpose		urpose pelow if signing in person at the Institution)
The student must appear in pe	erson at			
				dary Education Institution)
driver's license, other state-is	sued ID, or passport. The ir	stitution will main	tain a cop	oto identification (ID), such as, but not limited to, a y of the student's photo ID that is annotated by the the institution authorized to receive and review the
In addition, the student must s	sign, in the presence of the i	nstitutional officia	l, the State	ement of Educational Purpose provided below.
	Identity and S	statement of Edu	cational F	Purpose
(Complete this section and th	e Statement of Educational	Purpose provided	below if s	igning in the presence of a Notary only if unable to
	<u>sign</u>	n person at the in	stitution)	
If the student is unable to app	ear in person at	() ((5)	
to verify his on how intentity, the			of Postsec	condary Education Institution)
to verify his or her identity, the	•		:: (ID) tl	
or that is presented t (b) The original Stateme	o a notary, such as, but not ent of Educational Purpose the Statement of Education	limited to, a drive provided below, w	r's license hich must	nat is acknowledged in the notary statement below, other state-issued ID, or passport; and be notarized. If the notary statement appears on a clear indication that the Statement of Educational
	Stater	nent of Educatio	nal Purpo	se
I certify that I	am the individual signing this Statement of Educational Purpose			
	(Print Student's Name)			
and that the Federal student attending	financial assistance I may i	eceive will only be	e used for	educational purposes and to pay the cost of
	(A) (D)		11 6	for 2025-2026.
	(Name of Postse	condary Educatio	nai institui	ion)
(Student's	Signature)	(Date)		(Student's ID Number)
(Financial Aid Administrator's Signature)				Date
	Notary's	Certificate of Acl	nowledge	ement
State of	ofCity/County of			On
before me,	pers	personally appeared,		
•	iry's Name)			(Printed name of signer)
, and proved to me on basis	of satisfactory evidence of i	dentification	/Type	e of government-issued photo ID provided)
To be the above-named pers	son who signed the foregoin	g instrument.	(туре	e di government-issueu prioto ib provideu)
WITNESS my hand and off	icial seal			
-		(Notary Signature)	(Date Commission Expires)
(Seal)				