

STATEMENT OF EDUCATIONAL PURPOSE

Student Information

Last name	First name	M.I.
Statement of Educational Purpose		
I certify that I,	, am th	ne individual signing this
(student's name) Statement of Educational Purpose and that the Fe be used for educational purposes and to pay the	ederal student financial assistance I ma	y receive will only
Student's signature	Date	2
Student's ID No		
Notary's Certificate of Acknowledgement	:	
State of		
City/County of		
On, before me, (date) (Notar		/
(date) (Notar	y's name)	
personally appeared, (printed name of signer)	, and pr	ovided to me on basis of
(printed name of signer) satisfactory evidence of identification		
	pe of government-issued photo ID prov	vided)
to be the above-named person who signed the forego		
WITNESS my hand and official seal (seal)		
	y signature)	
My commission expires on(date)		
(date)		
 You must have this form notarized and submit to issued photo identification to the Financial Aid of 111 West Avenue, Saratoga Springs, NY 12866-60 includes, but is not limited to a driver's license, non- 	office at SUNY Empire State College, 069. This form cannot be faxed. Accep	Financial Aid, otable photo identity
Reviewer Use Only		
Action/approval date	pproved 🗖 Denied	
Signature	Date	
Name and title		