

Student Financial Services Phone 518-255-5623 106 Suffolk Circle Fax 518-255-5844 Cobleskill, NY 12043

Financialaid@cobleskill.edu

2023-2024 Identity and Statement of Educational Purpose

(To be signed with Notary)

If the student is unable to appear in person at SUNY Cobleskill to verify his or her identity, the student must provide:

- 1. A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to a driver's license, other state-issued ID, or passport; and
- 2. The original Statement of Educational Purpose provided below, must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

Statement of Educational Purpose

I certify that I	am the individual signing this Statement of		
(print stude			
Educational Purpose and that th	e federal student financial assistance I may	y receive will only be	
used for educational purposes a	nd to pay the cost of attending SUNY Cob	leskill for 2023-2024.	
r	r		
(Student's Signature)		(Date)	
,		,	
(Student's ID Number)			
<u>Notar</u>	y's Certificate of Acknowledgement		
G			
City/County of			
On, b	efore me,		
(Date)	(Notary's name)		
personally appeared,		, and proved to me	
	rinted name of signer)	•	
on basis of satisfactory evidence	e of identification		
ž	(Type of government-issued		
to be the above-named person w	who signed the foregoing instrument.	•	
to e c une ues v e mumeu person v	and organica and roregoing more amount		
WITNESS my hand and offici	ial seal		
(seal)	an Sear		
(/	(Notary	(Notary signature)	
My commission expires on	· · · · · ·	<i>y</i>	
	(Date)		