

DOCUMENT MUST BE ORIGINAL – NO COPIES/FAXES ACCEPTED

PLEASE DO NOT LEAVE ANY LINE BLANK.

If a question does not apply to you enter \$0 or N/A. **Incomplete forms will not be processed.**

A. Student Information

			G00_____
Last Name	First Name	M.I.	Student ID #
Mailing Address (Including City, State and Zip)		Phone	

B. Confirmation of Student Identity

You **must appear in person** at State College of Florida to verify your identity by presenting a copy of valid government-issued photo identification (ID), such as, but not limited to: a driver’s license, other state-issued ID, or passport. The institution will maintain a copy of your photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect the student’s ID.

- Copy of driver’s license**
- Copy of US Passport**
- Certificate of Naturalization**
- Other official government issued ID**

For Office Use Only:

Type of Document:

Document Verified by:

Date Document Received:

C. Statement of Educational Purpose

I certify that I, _____, am the individual signing this Statement of Educational Purpose and
(Print Student’s Name)

that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending the State College of Florida for 2022-2023.

D. Certification

Each person signing this worksheet certifies that all the information reported on it is complete and correct. The student **(must sign in person or notarize the document)** must sign and date.

Student's Signature

Date

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to prison, or both.

For Office Use Only:

FA Counselor Initials

Date Received

Notary

THIS DOCUMENT MUST BE NOTARIZED UNLESS YOU COMPLETED SECTION D IN THE OFFICE OF FINANCIAL AID SERVICES. PLEASE ATTACH A COPY OF THE VIEWED IDENTIFICATION.

State of _____

City/County of _____

On _____, before me, _____
(Date) (Notary's name)

Personally appeared, _____, and proved to me on basis of satisfactory
(Printed name of signer)

Evidence of identification _____ to be the above-named
(Type of government-issued photo ID provided)

Person who signed the foregoing instrument.

WITNESS my hand and official seal

(Notary Signature)

My commission expires on _____
(Date)