



EMPIRE STATE UNIVERSITY

STATEMENT OF EDUCATIONAL PURPOSE

Student Information

Last name First name M.I.

Statement of Educational Purpose

I certify that I, _____, am the individual signing this
(student's name)
Statement of Educational Purpose and that the Federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Empire State University for 2023–2024.

Student's signature Date

Student's ID No.

Notary's Certificate of Acknowledgement

State of _____

City/County of _____

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

personally appeared, _____, and provided to me on basis of
(printed name of signer)

satisfactory evidence of identification _____
(type of government-issued photo ID provided)

to be the above-named person who signed the foregoing instrument.

WITNESS my hand and official seal

(seal)

(Notary signature)

My commission expires on _____
(date)

*** You must have this form notarized and submit this along with a copy of your unexpired valid government-issued photo identification to the Office of Financial Aid at Empire State University, Office of Financial Aid 111 West Avenue, Saratoga Springs, NY 12866, faxed to 518-580-4863, or emailed to financialaid@sunyempire.edu. Acceptable photo identity includes, but is not limited to a driver's license, non-driver's license, military identification or passport.**

Reviewer Use Only

Action/approval date _____ Approved Denied

Signature _____ Date _____

Name and title _____