



Financial Aid

MONROE COMMUNITY COLLEGE

2018-2019

Statement of Educational Purpose

Monroe Community College, Financial Aid Office-
Brighton Campus-1000 East Henrietta Road-Rochester, NY 14623, (585) 292-2050
Enrollment and Financial Services-Downtown Campus, (585) 685-6003

Last Name	First Name	M.I.	Banner Student ID

Form Instructions:

Complete the required section of this form in order to continue your Financial Aid process. Additional information may be required after the review of this form. If additional information is needed, our office will contact you via your MCC Student Email account.

The purpose of this form is to verify your identity and to affirm the Statement of Educational Purpose provided below. To verify your identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. We will maintain a copy of your photo ID that is annotated with the date it was received and the name of the official at MCC to collect the student's ID. In addition, you must sign, in the presence of the institutional official, the Statement of Education Purpose below.

Statement of Educational Purpose

I certify that I, _____, am the individual signing this Statement of
(Print Student's Name)
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 Monroe Community College for 2018-19.

Certification and Signatures – Student Must Sign:

I certify that the submitted information is true and correct to the best of my knowledge and belief. If asked by an authorized official, I agree to provide additional proof of the information provided on this form. I understand that purposely providing false or misleading information on this form may result in reduction or repayment of aid, fines and/or imprisonment in this and/or future years. I authorize the use of this information and any supporting documentation for all Monroe Community College campuses.

NOTICE: FAILURE TO SUBMIT REQUIRED FORMS WITHIN 90 DAYS FROM THE LAST TERM FOR WHICH YOU WERE ENROLLED FORFEITS YOUR ABILITY TO BE CONSIDERED FOR FEDERAL FINANCIAL AID FOR THIS ACADEMIC YEAR.

Student Signature	Date

To be Signed in the Presence of a Notary:

If the student is **unable to appear** in person at Monroe Community College to verify his or her identity, the student must provide the institution BOTH (a) and (b) notated below with this form.

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged by the notary statement below, or that is presented to a notary, such as, but not limited to: a driver's license, other state-issued ID, or passport; AND
- (b) The **original Statement of Educational Purpose** provided below, which must be notarized.

I certify that I, _____, am the individual signing this Statement of

 (Print Student's Name)
 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 Monroe Community College for 2018-19.

Certification and Signatures – Student Must Sign:

I certify that the submitted information is true and correct to the best of my knowledge and belief. If asked by an authorized official, I agree to provide additional proof of the information provided on this form. I understand that purposely providing false or misleading information on this form may result in reduction or repayment of aid, fines and/or imprisonment in this and/or future years. I authorize the use of this information and any supporting documentation for all Monroe Community College campuses.

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Student Signature, if signing in front of a Notary	Date

Notary's Certificate of Acknowledgement

State of _____ City/County of _____ on _____,
 _____ (Date)

before me, _____ personally appeared
 _____ (Notary's name)

_____, and provided to me on basis of satisfactory
 _____ (Printed name of Signer)

evidence of identification _____ to be the above-named person who
 _____ (Type of government-issued id provided)
 signed the foregoing instrument.

WITNESS my hand and official seal

 (seal)

 (Notary signature)

My commission expires on _____
 _____ (Date)

Financial Aid Office Use Only

Staff Signature: _____ Date: _____