2025-2026 Identity and Statement of Educational Purpose (To Be Signed by Institution)

The stu	dent must appear in person atS	UNY Niagara_	_ to			
	(Name o	of Postsecondary Educa	tional Institution)			
(ID), suc will ma was rec	is or her identity by presenting an unex ch as, but not limited to, a driver's licen intain a copy of the student's photo ID eived and reviewed, and the name of the student's ID.	se, other state-issued II that is annotated by the	o, or passport. The institution ne institution with the date it			
	ion, the student must sign, in the prese onal Purpose provided below.	nce of the institutional	official, the Statement of			
	-	nent of Educational Pur the Presence of a Nota	-			
If the st	udent is unable to appear in person at	SUNY Niagara				
			ry Educational Institution)			
to verif	y his or her identity, the student must p	rovide to the institution	n:			
	 a) A copy of the unexpired valid government-issued photo identification (ID) that is 					
	acknowledged in 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. If					
	the notary statement appears on a separate page than the Statement of Educational Purpose,					
	there must be a clear indication that th	e Statement of Education	onal Purpose was the document			
notarized.						
Statement of Educational Purpose						
	I certify that I		am the individual signing			
	(Print Student's Nam	ne)				
	this Statement of Educational Durness	and that the Enderal stu	ident financial assistance I may			
	this 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 SUNY Niagara for 2025-2026. (Name of Postsecondary Educational Institution)					
,						
-	(Student's Signature)	(Student ID #)	(Date)			

2025-2026 Notarization of Identity and Statement of Educational Purpose

State of	New York		
City/County of	Niagara		
On	, before me,		
(Date)		(Notary's Name)	
personally appeared	,		, and proved to me
	(Printed Name of S	Signer)	
on the basis of satisf	actory evidence of identifica		
		(Type of <u>Unexpired</u> (Photo ID Provided)	
to be the above-nam	ned person who signed the fo	oregoing instrument.	
WITNESS my hand a	nd official seal		
(Seal)		(Notary Signa	ature)
My commission expi	res on		
They commission exp.	(Date)		
Sworn to before me			