SUNY POLYTECHNIC INSTITUTE

2024- 2025
IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

Please complete this form using ink. Electronic or typed signatures are unacceptable.

All students that take class(es) at the SUNY Poly site in Utica are required to complete this form in the presence of a Financial Aid Office staff member.

The Financial Aid Office at SUNY Polytechnic Institute has been notified that your FAFSA has been selected for verification.

You will need to provide an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, non-driver's identification card, other State-issued ID or U.S. passport.

In addition, you must sign, <u>in the presence of a Financial Aid Office staff member</u>, the following:

<u>Statement of Educational Purpose</u>

I certify that I, _____, am the individual signing this
Print 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 SUNY Polytechnic Institute for 2024-2025.

_____	U00_____	_____
Student's Signature	SUNY Poly ID #	Date

FOR OFFICE USE ONLY

_____	_____
Name of financial aid representative who verified form & ID	Date

___ Attached signed and dated copy of government-issued ID

SUNY POLYTECHNIC INSTITUTE

2024- 2025
IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE

Please complete this form using ink. Electronic or typed signatures are unacceptable.

All students that take class(es) at the SUNY Poly site in Albany or are online/distance learners are required to complete this form in the presence of a Notary.

The Financial Aid Office at SUNY Polytechnic Institute has been notified that your FAFSA has been selected for verification.

You will need to provide an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver's license, non-driver's identification card, other State-issued ID or U.S. passport.
AND submit this original notarized Statement of Educational Purpose to the Financial Aid Office.

Statement of Educational Purpose

I certify that I, _____, am the individual signing this
Print 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 SUNY Polytechnic Institute for 2024 - 2025.

_____ U00_____ _____
Student's Signature SUNY Poly ID # Date

Notary's Certificate of Acknowledgement

State of _____ City/County of _____

on _____, before me, _____
Date Printed Notary's Name

personally appeared _____, and provided to me
Printed Name of Signer

on basis of 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's Signature

My commission expires on_____
Date

Financial Aid Office, SUNY Polytechnic Institute, 100 Seymour Rd, Utica, NY 13502 Phone: 315-792-7210 Fax 315-792-7220 Email: finaid@sunypoly.edu