



# New Paltz

STATE UNIVERSITY OF NEW YORK

Office of Student Financial Services  
200 Hawk Drive, New Paltz, NY 12561-2438  
Ph: 845-257-3250 • Fax: 845-257-3568

## IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE 2022-2023

\_\_\_\_\_  
*Student's Name*

N	_____
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*Student ID*

The student is required by federal regulation to appear in person at SUNY New Paltz to verify his or her identity by presenting an unexpired valid government-issued photo identification (ID), such as a driver's license, non-driver's identification card, other State-issued identification, or U.S. passport. You will need to bring your ID to the Student Financial Services Office and complete the statement below before any financial aid can be awarded. Normal hours are Monday-Friday 8:30a.m. - 5:00p.m. during fall and spring semesters and 8:00 a.m. - 4:00p.m. during summer and winter break. You may want to verify office availability by calling (845) 257-3250. Please do not sign the statement below before arriving in Student Financial Services (Wooster Hall 124).

### STATEMENT OF EDUCATIONAL PURPOSE

I certify that I (*print student's name*) \_\_\_\_\_ am the individual signing 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 New Paltz for 2022-2023.

\_\_\_\_\_  
*Student's Signature*

\_\_\_\_\_  
*Date*

### OFFICE USE ONLY

\_\_\_\_\_  
*Witnessed and reviewed by*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of certified staff person*

\_\_\_\_\_  
*Printed name of certified staff person*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*ID presented*

\_\_\_\_\_  
*Document number*

Copy enclosed Yes  No