

Financial Aid Office, Bldg. 2 1000 College Blvd., Pensacola, FL 32504-8998

Office Phone: 850.484.1680

Questions: fava@pensacolastate.edu

## FINANCIAL AID, VETERANS & MILITARY FAMILY SERVICE CENTER, AND SCHOLARSHIPS Identity and Statement of Educational Purpose Verification Document 2025-2026

nt Name: I	Last, First, M.I.	Date of Birth	Student ID#			
Option	ns for confirming identity	and submitting this Statem	ent:			
un fo	Complete the form in person in the Financial Aid Office at Pensacola State College. Valid, unexpired government-issued photo identification is required. Military IDs are not acceptable forms of identification as photocopying of military identification cards and common access cards (CAC) is prohibited by law.  OR					
Pa on re	ige 2 of this form in the Page 2. A notarized co quired. Military IDs ar	nt, out-of-state, or are oth presence of a notary and opy of your valid, unexpir	erwise unable to appear in person, complete mail the completed form to the address provided ed government-issued photo identification is identification as photocopying of military			
	Iden	tity and Statement of Edu (To Be Signed at the Ir	•			
valid, g or pass date it v student	government-issued photo id- port. The institution will ma was received and reviewed, 's ID. tion, the student must sign,	entification (ID), such as, but aintain a copy of the student's and the name of the official a	verify his or her identity by presenting an unexpired, not limited to, a driver license, other state-issued ID, photo ID that is annotated by the institution with the t the institution authorized to receive and review the onal official, the following Statement of Educational			
		Statement of Educationa	ıl Purpose			
		(Print Student's Name) pose and that the Federal stude	am the individual signing this Statement of ent financial assistance I may receive will only be used attending Pensacola State College for academic year			
	Student's S	ignature	Date			
	Student's ID	Number				
		FOR FINANCIAL AI	D OFFICE USE ONLY			
Valid Gove	ernment-issued Photo Identific	cation Used:				
Date Recei	ved·	Received By:				

Revised 10/2024 1



(Notary Seal)

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	D'AN LAB'AMI			
	Print Name: Last, First, M.I.	Date of	of Birth	Student ID#
		Statement of Edgned in the Prese		
If the sti	udent is unable to appear in person at Pensacon:	cola State College to	o verify his or h	ner identity, the student must provide to the
no sta (b) Tl sta	copy, preferably color, of the unexpir of limited to, a driver license, other sta atement below, or that is presented to be original Statement of Educational I atement appears on a page from the S at the Statement of Educational Purp	ate-issued ID, or particular in the second i	passport that and I below, whic cational Purp	t is acknowledged in the notary th must be notarized. If the notary pose, there must be a clear indication
	State	ement of Education	nal Purpose	
	I certify that I		am	the individual signing this Statement of
	Educational Purpose and	that the Federal stu	dent financial a	assistance I may receive will only be used ensacola State College for academic year
	Student's Signature		Dat	te .
	Student's ID Number			
	Notary's (	Certification of A	cknowledgen	ment
	State of			
	County of	<del></del>		
		_, before me,		, personally
	(Date)	Itudantia Nama)	(Notary's nam, and	proved to me on the basis of
	satisfactory evidence of identif	ication	overiend coveres en on	at isomed whote ID manyided)
	to be the above-named person v	(Type of un who signed the fo	expired governmer regoing instru	in-issued photo iD provided)

2 Revised 10/2024

My Commission expires on \_

(Notary Signature)

(Date)