



Return this form to:  
Office of Financial Aid  
1156 College Drive  
Summit, MS 39666

## STATEMENT OF EDUCATIONAL PURPOSE FORM

Instructions:

1. Student must appear in person in the Financial Aid Office or before a Notary to verify his or her identity.
2. Student must present a valid government-issued photo identification to the Notary.  
(Examples: driver's license, other state-issued ID, or passport)
3. Notary will photocopy the student's ID.
4. Student must complete and sign the Statement of Educational Purpose below in the presence of a Notary.
5. Notary must complete and sign Certificate of Acknowledgement below.
6. Student must submit original notarized statement and photocopy of ID to the SMCC Financial Aid Office.

**THIS FORM MUST BE SIGNED IN THE PRESENCE OF A NOTARY IF YOU WILL NOT BE SUBMITTING IN PERSON TO THE FINANCIAL AID OFFICE!**

### *Statement of Educational Purpose*

I certify that I \_\_\_\_\_ 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 Southwest Mississippi Community College for 2024-2025.

(Print Student's Name)

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

\_\_\_\_\_  
Student's ID or SSN

\_\_\_\_\_  
Date

### *Notary's Certificate of Acknowledgement*

State of \_\_\_\_\_ City/County of \_\_\_\_\_

On \_\_\_\_\_, before me, \_\_\_\_\_ personally appeared, \_\_\_\_\_

(Date)

(Printed name of Notary)

and provided to me on basis of satisfactory evidence of identification \_\_\_\_\_

(Printed name of Student)

to be the above-named person who signed the foregoing instrument.

(Type of government-issued photo ID provided)

WITNESS my hand and official seal \_\_\_\_\_

(seal)

(Notary Signature)

My commission expires on \_\_\_\_\_

(Date)

### *For Financial Aid Office Use Only*

Proof of Identity/Statement of Educational Purpose was submitted to: \_\_\_\_\_  
(Financial Aid Staff)

\_\_\_\_\_ In Person (or) \_\_\_\_\_ Notarized on \_\_\_\_\_  
(Date)