



Umpqua Community College  
 Financial Aid Office  
 PO Box 967  
 Roseburg, Oregon 97470  
 541.440.4602 | 541.440.4612 (FAX)  
 FinancialAid@umpqua.edu

**2019-2020**  
**Identity & Statement of**  
**Educational Purpose (Notary)**

If the student is unable to appear in person at the Financial Aid Office at Umpqua Community College, to verify his or her identity, the student must provide to the institution:

- 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 the Statement of Educational Purpose was the document notarized.

***Do not sign this form prior to notarization. Originals must be mailed to the address listed above (copies or faxed forms will not be accepted).***

**STATEMENT OF EDUCATIONAL PURPOSE**

I certify that I \_\_\_\_\_ am the individual signing this  
 (Print Student 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 Umpqua Community College for 2019-2020.

*By signing below, I certify that the above information is true and correct. I also understand that if I give false or misleading information, I may be fined up to \$20,000, sent to prison, or both.*

Sign in front of Notary

\_\_\_\_\_  
 (Student Signature)

\_\_\_\_\_  
 (Date)

\_\_\_\_\_  
 (Student ID Number)

**NOTARY'S CERTIFICATE OF ACKNOWLEDGEMENT**

State of \_\_\_\_\_

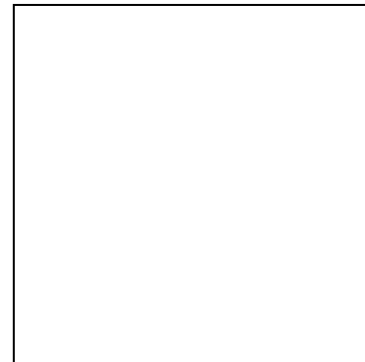
City/County of \_\_\_\_\_

On \_\_\_\_\_, before me \_\_\_\_\_ personally appeared,  
 (Date) (Notary name)

\_\_\_\_\_, and proved to me on the basis of satisfactory evidence of identification  
 (Printed name of signer)

\_\_\_\_\_ to be the above-named person who signed the foregoing instrument.  
 (Type of government-issued photo ID provided)

**WITNESS my hand and official seal**



\_\_\_\_\_  
 (Notary Signature)

My commission expires on \_\_\_\_\_  
 (Date)