



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

2020-2021
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 2020-2021.

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)

