

Office of Financial Aid

6 Pennyfield Avenue • Throggs Neck, NY • 10465

Tel: 718-409-7200 • Fax: 718-409-7275 • Email: financialaid@sunymaritime.edu

2016-2017 IDENTITY AND STATEMENT OF EDUCATIONAL PURPOSE VERIFICATION

Your 2016–2017 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called “Verification”. We are required to verify your identity and to collect your Statement of Education Purpose.

You can do this one of two ways; 1. Appear in person at SUNY Maritime’s Financial Aid Office with page one of this form and a valid government-issued photo identification. 2. If you are

unable to appear in person then page two of this document must be completed and the original mailed to SUNY Maritime’s Financial Aid Office along with a copy of a valid government-issued photo identification.

Complete this verification request as soon as possible to prevent delays in the receipt of your financial aid award.

A. Student Information

Last Name

First Name

M.I.

Maritime ID#

Street Address (include apt. no.)

Phone Number (include area code)

City

State

Zip Code

B. Identity/Statement of Educational Purpose

Identity/Statement of Educational Purpose (To Be Signed IN-PERSON at Maritime College)

You must appear in person at SUNY Maritime College to verify your identity by presenting a valid government-issued photo identification (ID), such as, but not limited to, a driver’s license, other state-issued ID, or passport. The College will maintain a copy of the student’s photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect the student’s ID.

In addition, you must sign, in the presence of the institutional official, the following:

Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement of Educational Purpose and that
(Print Student’s Name)

the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending SUNY Maritime College for 2016-2017.

Student’s Signature

Date

Staff Initials & Date _____

ID Reviewed & Copied: Driver License State ID Passport Other: _____

STUDENT NAME _____ **Maritime ID#** _____

Identity/Statement of Educational Purpose (To Be Signed With Notary)

If the student is unable to appear in person at SUNY Maritime College to verify his or her identity, the student must provide:

- (a) A copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to a driver’s license, other state-issued ID, or passport; and
- (b) The original notarized Statement of Educational Purpose provided below.

Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement of Educational Purpose and that
(Print Student’s Name)

The federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending SUNY Maritime College for 2016-2017.

Student’s Signature Date

Notary’s Certificate of Acknowledgement

State of _____

City/County of _____

On _____, before me, _____,

(Date) (Notary’s name)

personally appeared, _____, and provided to me

(Printed name of signer)

on basis of satisfactory evidence of identification _____

(Type of government-issued photo ID provided)

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

WITNESS my hand and official seal

(seal)

(Notary signature)

My commission expires on _____

(Date)

Please return completed form to:

SUNY Maritime College
Financial Aid Office
6 Pennyfield Avenue
Throggs Neck, NY 10465

