Mastrangelo Financial Aid Center

2019-2020 Identity and Statement of Educational Purpose

PLEASE NOTE: You must either submit this form in person or send via US Mail. We CANNOT accept copies via fax or email.

To be signed at HVCC with Financial Aid Official

The student must appear in person at Hudson Valley Community College to verify his or her identity by presenting valid unexpired government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport. The institution 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 documentation.

In addition, the student must sign, in the presence of the institutional official, the Statement of Educational Purpose provided below.

Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement of Educational Purpose
(Student's Name)
and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Hudson Valley Community College for 2019-2020.

_____ _____ _____
(Student's Signature) (Date) (ID Number)

To Be Signed With Notary (if cannot appear in person)

If the student is unable to appear in person at Hudson Valley Community College to verify his or her identity, the student must provide the following by postal mail:

(a) A copy of the valid unexpired 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, which is provided below and must be notarized.

Notary's Certificate of Acknowledgement

State of _____City/County of _____

on_____, before me, _____, personally appeared,
(Date) (Notary's name)
_____, and proved to me on 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
(seal)

_____
(Notary signature)

My commission expires on _____
(Date)

HVCC Financial Aid Office
80 Vandenburgh Ave
Troy, NY 12180

Phone 518-629-7150

Guenther Room 110
Monday-Friday
8AM-5PM