

Office of Student Financial Assistance SFA Box 13052 Nacogdoches, TX 75962-3052 (936) 468-2403 FAX (936) 468-1048 finaid@sfasu.edu

Identity and Statement of Educational Purpose

Student Neme	Student ID	Academic Year
photo identification (ID), suc maintain a copy of the studer	th as, but not limited to, a driver's licens at's photo ID that is annotated with the c	fy his or her identity by presenting a valid government-issued e, other state-issued ID, or passport. The institution will late it was received and the name of the official at the institution e presence of institutionally authorized personnel.
	Statement of Educa	ntional Purpose
I certify that	nt I(Print Student's Name)	am the individual signing this
Statement	of Educational Purpose, and that the fed	eral student financial assistance
I may recei	ive will only be used for educational pur	poses and to pay the cost of attending
Stephen F.	Austin State University.	
`	Signature)	(Date)
Received E	By(FAO Personnel Only)	
	(FAO Personnel Only)	(Date)
	Statement of Educational Purpose (no facinities in person at the Financial Aid C	ked or emailed documents will be accepted). This form is not office, only if returning by mail.
	Notary's Certificate of	Acknowledgement
State of	City/County of	
On	, before me,	ry's Name) personally appeared,
(Date)	(Nota	ry's Name)
(Printed name of signer)	, and provided to	me on basis of satisfactory evidence of
,		
(Type of gove	to be ernment-issued photo ID provided)	e the above-named person who signed the foregoing instrument.
WITNESS my hand and of	ficial seal	
(seal)	(Notary signate	ure)
	My commissio	n expires on(Date)
	•	(Date)