



149 S. E. College Place
Lake City, FL 32025-2007

(386) 754-4284
www.fgc.edu

Identity and Statement of Educational Purpose

If the student is unable to appear in person at _____ Florida Gateway College _____ to verify his or
(Name of Postsecondary Educational Institution)
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
(Print Student’s Name)
signing this 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 _____ Florida Gateway College _____ for _____.
(Name of Postsecondary Educational Institution) (Aid Year)

(Student’s Signature) (Date)

(Student’s ID Number)

Notary’s Certificate of Acknowledgement

State of _____ County of _____

Before me, the undersigned notary public, this day, personally, appeared _____ to me known, who being duly sworn according to law, deposes the following:

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Public

My Commission Expires: _____
___ Personally Known
___ Produced Identification

Type of Identification Produced _____