



**Office of Student Financial Services**

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**2023-2024 Verification of Identity and Educational Purpose - NOTARY**

Student Name: \_\_\_\_\_

SMC ID# \_\_\_\_\_

**Important Instructions:**

- **Complete this form in person with a public notary and submit the original to Student Financial Services with a copy of the valid, government issued photo ID which was presented to the public notary.**
- **You may also verify your identity in person at the Office of Student Financial Services with a valid, government-issued photo ID such as, but not limited to, a driver's license, passport or state-issued ID.**

**Statement of Educational Purpose**

I certify that I \_\_\_\_\_ am the individual signing  
(Print Student's Name)

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 Saint Michael's College for 2023-2024.

\_\_\_\_\_  
(Student's Signature)

\_\_\_\_\_  
(Date)

**Notary's Certificate of Acknowledgement**

State of \_\_\_\_\_

City/County of \_\_\_\_\_

On \_\_\_\_\_, before me, \_\_\_\_\_  
(Date) (Notary's name)

Personally appeared, \_\_\_\_\_, and proved 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)

**F23IDSEP For Student Financial Services Use Only:**

On \_\_\_\_\_, I, received and reviewed this original, notarized form which contained the original signatures of both the  
(Date) student and the notary and the public notary's original seal.

\_\_\_\_\_  
SFS Staff Name

\_\_\_\_\_  
SFS Staff Signature