

2016-2017 STATEMENT OF EDUCATIONAL PURPOSE

Important Instructions (In order to complete this form, you have two options from which to choose.)

Option 1 Submit this form directly to MCC Enrollment Services.

This form must be completed and signed in front of a MCC enrollment services staff member. Do not complete any part of this form until you are in the presence of a MCC enrollment services staff member. Otherwise, it will not be accepted.

Option 2 Mail this form

If you are unable to appear in person at Enrollment Services, then you may complete this form in the presence of a notary public. This completed form cannot be faxed or emailed to our office. Mail the completed, notarized form with a copy of your ID to: Middlesex County College Financial Aid Office, 2600 Woodbridge Ave., Edison, NJ 08818

For Both Identification is Required

In addition to this form, you must provide a valid (un-expired) form of government-issued photo identification. Examples of acceptable ID are a driver's license, state-issued ID, or passport. Your MCC ID card cannot be accepted for the purposes of this form because it is not government-issued.

A. Student Information

Student Name: _____ MCC ID#: _____
(Print Last Name) (Print First Name)

B. Statement of Educational Purpose (Do Not sign unless you are in the presence of a Enrollment Services Representative).

I certify that I _____ am the individual signing this Statement of Educational Purpose
(Print 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 Middlesex County College for 2016-2017.

Student's Signature Date Enrollment Service Representative's Signature Date

C. Notary's Certificate of Acknowledgement

This form is required to be notarized only if you are unable to appear in person.

State of _____ City/County of _____ on _____,

_____ personally appeared before me, _____,
(Student's Name) (Notary's Name)

and provided to me on the basis of satisfactory evidence of identification _____,
(Type of government-issued photo ID provided)

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

Witness by my hand and official seal _____
(Notary's Signature) (Date commission expires)

D. Enrollment Services Office Section

Submitted: In person
 By Mail

Enrollment Services Representative Name (Print) Enrollment Service Representative Signature Date Received