



Polk State College is committed to equal opportunity/equal access in its programs, services, and activities.



Student Financial Services

Student Information

Student Name:	Student ID:
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Identity and Statement of Educational Purpose (to be signed with notary)

I, _____, (the student) certify that I am the individual signing this **Statement of Educational Purpose** and that the federal financial aid assistance I may receive will only be used for educational purposes to pay for the cost of attending Polk State College for **2022-2023** Academic Year.

Student Signature Date

Notary Stamp Date

Signature of Notary

Mail this original notarized form to:

Office of Student Financial Services
999 Avenue H NE
Winter Haven, FL 33881-4299

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