SUNY Cobleskill

Student Financial Services
106 Suffolk Circle
Cobleskill, NY 12043

Phone 518-255-5623
Fax 518-255-5844
Financialaid@cobleskill.edu

2026-2027 Identity and Statement of Educational Purpose

Federal Department of Education requires us to verify your Identity. Please review the options bellow and choose one method to complete your Identity Verification.

Verification Options

1. **In-Person Verification:** Please visit the Student Financial Services office located in Knapp Hall at SUNY Cobleskill. Bring one of the following: a valid, unexpired government-issued photo ID, driver's license, state-issued ID, or passport.

2. **Video Call Verification:** Go to www.Cobleskill.edu/sfs to schedule a Zoom meeting. During the meeting, present your valid, unexpired government-issued photo ID, driver's license, state-issued ID, or passport. After the Zoom meeting, you will still need to visit our office to present the ID at a later date.

3. **Notarized Verification:** Locate a notary and complete the information below in their presence (do not fill it out beforehand, as they need to witness your signature). After it has been notarized, mail the **original document** and a photocopy of the ID you presented to us at the address provided above. Scanned, faxed or photo copies of this form will not be accepted. Copies of the ID only are allowed.

Statement of Educational Purpose

I certify that I _____ am the individual signing this Statement of
(*print student's name)*
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 SUNY Cobleskill for 2026-2027.

_____ _____ _____
(***Student's Signature***) (***Date***) (***Student's ID Number***)

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***)

Revised 11/25