Statement of Educational Purpose
2023 - 2024

Student’s Name: ______________________ Student’s ID Number: _____________

This form must be completed and signed in the presence of either a Limestone University Financial Aid Counselor or a Notary Public. **Do NOT complete the form in advance.**

Instructions:

Either: The student must appear in person at Limestone University to verify his or her identity by presenting an unexpired valid government-issued photo identification (ID), such as, but not limited to, a driver’s license, other state-issued ID, or passport. The institution will maintain a copy of the student’s photo ID that is annotated by the institution with the date it was received and reviewed, and the name of the official at the institution authorized to receive and review the student’s ID.

Or: If the student is unable to appear in person at Limestone University to verify his or her identity, the student must provide to the institution:

- A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver’s license, other state-issued ID, or passport; and
- The original Statement of Educational Purpose provided below, must be notarized. If the notary statement appears on a separate page than the statement of educational purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

1115 College Drive, Gaffney, SC  29340-3799 • Office: 864-488-8231
financialaid@limestone.edu
I certify that I, ______________________________ (Print Student’s Name) am the individual 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 Limestone University for 2023-2024.

Student’s Signature: ______________________________ Date: __________________________

Student’s ID Number: ____________________________

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Submitted in Person
To be completed by a Limestone University Financial Aid Administrator

| Signature: |              |
| Date:      |              |

Submitted by Mail
Notary’s Certificate of Acknowledgement

| State of: | Witness my hand and official seal |
| County of: | Notary’s Signature: |
| On (Date): | ____________________________ |

Before me (Notary’s Name):

______________________________

personally appeared (Student’s Name):

______________________________

and proved to me based on satisfactory evidence of identification ____________________

(Type of unexpired government-issued photo ID provided) to be the above-named person who signed the foregoing instrument.

My commission expires on: ____________