

Financial Aid Office

31107 Investment Blvd, Suite 290 El Dorado Hills, CA 95762 Phone: 916-306-0810 www.sum.edu

2019-2020 Statement of Educational Purpose

Educational Purpose and that the Federal stu	am the individual signing this Statement of ident assistance I may receive will only be used for educational purposes <i>College & Theological Seminary</i> for 2019-2020.
Student Signature	Date
Student's ID Number	
This section to be completed by school off	icial only:
V	erification by School Official
Name of School Official Title of	School Official SUM Bible College & Theological Seminary Name of Institution
government issued ID or passport. If above an unexpired valid government-issued ph presented to a notary, such as, but not lim An unexpired Passport	eared before me in person and has presented an unexpired valid listed student cannot appear in person they must present to a Notary oto ID that is acknowledged in the notary statement below, or that is nited to, a driver's license, or other state-issued ID or passport.
A valid unexpired Driver's License or o	ther state-issued ID
An alternate unexpired valid, governme	nt-issued ID (State the ID Type)
Furthermore, I have an annotated copy of the this institution that was authorized to receive	is ID which includes the date it was received and the name of the person at e it.
Signature of Official	Date
Verification by Notary Public (Only	to be used if student is unable to appear in person at the institution)
State of:	
City/County of:	
On:, before	e me,
(Date)	(Notary's Name)
personally appeared,(Printed Name	, and provided to me on basis of satisfactory evidence of of Signer)
	to the above-named person who signed the foregoing instrument.
WITNESS my hand and official seal (Seal)	(Notary Signature)
	My commission expires on (Date)