CCA CALIFORNIA COLLEGE OF THE ARTS

Office of Financial Aid, 1111 Eighth Street, San Francisco, CA 94107 P: 415.703.9528 F: 415.551.9261 Email: finaid@cca.edu

Statement of Educational Purpose (Signed with Notary)

Your application was selected for review in a process called "Verification." You are required to submit this Statement of Educational Purpose. Federal law gives us the right to ask you for this information before awarding Federal aid to ensure all information is accurate. If there are differences between your application information and your financial documents, we will make the appropriate corrections electronically. This form must be filled out correctly and completely to finalize your financial aid file.

The student is must provide both (a) and (b) to be considered for financial aid;

(a.) a valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport; and
(b.) the original notarized Statement of Educational Purpose provided below.

I certify that I _____ am the individual signing this
(Print Student's Name)
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 California College of the Arts for 2021-2022.

_____ _____
Student Signature **Date** **Student ID Number or Social Security Number**

Notary's Certificate of Acknowledgement

State of _____

City/County of _____

On_____, before me, _____,
(Date) (Notary's name)

personally appeared, _____, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal _____
(Notary signature)

(seal) My commission expires on _____
(Date)

Each person signing this form certifies that all the information reported on it is complete and correct. At least one parent signature is required. **Warning:** If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.