

#### Important Instructions (In order to complete this form, you have two options from which to choose.)

#### Option 1 Submit this form directly to Middlesex College Enrollment Services. This form *must* be completed and signed in front of a Middlesex College Enrollment Services staff member. Do not complete any part of this form until you are in the presence of a Middlesex College Enrollment Services staff member. Otherwise, it will not be accepted. Option 2 Mail this form If you are unable to appear in person at Enrollment Services, then you may complete this form in the presence of a notary public. This completed form *cannot* be faxed or emailed to our office. Mail the completed, notarized form with a copy of your ID that was presented to the notary to: Middlesex College Financial Aid Office 2600 Woodbridge Ave., Edison, NJ 08818-3050 For Both Identification is Required In addition to this form, you must provide a valid (un-expired) form of government-issued photo identification. Examples of acceptable ID are a driver's license, state-issued ID, or passport. Your Middlesex College ID card cannot be accepted for the purposes of this form because it is not government-issued.

# A. Student Information

Last Name:	 	
First Name:	 	
Middlesex College ID Number:		

### **B. Statement of Educational Purpose**

(Do Not sign unless you are in the presence of an Enrollment Services Representative or Notary.)

I certify that I, (Please 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 Middlesex College for 2025-2026. By signing this worksheet, the student certifies that all of the information reported is complete and correct. *Warning: If you purposely give false or misleading information, you may be fined, sent to prison, or both.* 

Student's Signature:

Date:\_\_\_\_\_

### C. Notary's Certificate of Acknowledgement

This form is required to be notarized only if you are unable to appear in person.

State of	City/County of	on,
(Student's name)		, personally appeared before me,
(Notary's name)		, and provided to me on the basis
	-issued photo ID provided) ne above-named person who signed	
Witness by my hand	and official seal:	
Notary's Signature:		Date commission expires:

### **D.** Certification and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

Student Signature:			

## E. Enrollment Services Office Section

Submitted: O In person O By Mail

Enrollment Services Representative Name (Please print):

Enrollment Service Representative Signature	:	Date Received:
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