



**Hinds Community College  
Office of Financial Aid  
2023-2024  
Statement of Educational  
Purpose**

<p><b>Office Use Only:</b></p> <p>Name: _____</p> <p>ID: _____</p> <p>Received by: _____ FA23CEPS</p>
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**A. STUDENT INFORMATION**

\_\_\_\_\_

Last Name                      First Name                      M.I.                      ID Number **(REQUIRED)**                      Phone number

**B. IDENTITY AND STATEMENT OF PURPOSE**

**(to be signed by an approved Institutional Official or in the Presence of a Notary)**

1. The student must appear in person at HINDS COMMUNITY COLLEGE to verify his or her identity by presenting a valid government-issued photo identification (ID), such as, but not limited to, a driver's license, other state-issued ID, or passport

**If unable to appear in person, Hinds Community College may accept a mailed and notarized copy of this document accompanied by a copy of a valid government-issued photo ID.**

2. In addition, **the student must sign, in the presence of the Institutional Official**, the Statement of Educational Purpose provided below:

Statement of Educational Purpose

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 \_\_\_\_\_ for 2023-2024  
Hinds Community College  
(Name of Postsecondary Educational Institution)

Student Signature: \_\_\_\_\_ ID # \_\_\_\_\_ Date: \_\_\_\_\_

Official's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**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)

In compliance with Title VI of the Civil Rights Act of 1964, Title IX, Education Amendments of 1972 of the Higher Education Act, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990 and other applicable Federal and State Acts, Hinds Community College offers equal education and employment opportunities and does not discriminate on the basis of race, color, national origin, religion, sex, age, disability or veteran status in its educational programs and activities. We recognize our responsibility to provide an open and welcoming environment that fosters a culture of diversity, equity, and inclusion for employees and students to collaboratively learn, work and serve our communities. **The following have been designated to handle inquiries regarding these policies: EEOC Compliance:** Marquise Kessee, Director of Diversity, Equity and Inclusion Box 1100 Raymond MS 39154; Phone: 601-857-3458 or Email: [EEOC@hindsc.edu](mailto:EEOC@hindsc.edu). **Title IX:** DeAndre House, Associate Vice President Student Services, Title IX Coordinator Box 1100 Raymond MS 39154; Phone: 601-857-3353 or Email: [TitleIX@hindsc.edu](mailto:TitleIX@hindsc.edu).

Mail to: Office of Financial Aid – P.O. Box 1100 – Raymond, MS 39154-1100 or Appear in Person