

Student Name: _____ ID: _____

2023 – 2024 FAFSA SIGNATURE PAGE

INSTRUCTIONS: One or more signatures were missing from your Free Application for Federal Student Aid (FAFSA). Until all required signatures are on the FAFSA form we are unable to offer you any financial assistance. Read, sign, and submit this form for processing to the Student Service Center.

If you are the student, by signing this application, you agree, if asked, to provide information that will verify the accuracy of your completed form. This information may include a copy of your U.S. or state income tax form. Also, you certify that you

1. will use federal student financial aid only to pay the cost of attending an institution of higher education,
2. are not in default on a federal student loan or have made satisfactory arrangements to repay it,
3. do not owe money back on a federal student grant or have made satisfactory arrangements to repay it,
4. will notify your school if you default on a federal student loan, and
5. will not receive a Federal Pell Grant from more than one college for the same period of time.

If you are the parent or the student, by signing this application you certify that all of the information you provided is true and complete to the best of your knowledge and you agree, if asked, to provide information that will verify the accuracy of your complete form. This information may include U.S. or state income tax forms that you filed or are required to file. Also, you certify that you understand that **the Secretary of Education has the authority to verify information reported on this application with the Internal Revenue Service and other federal agencies.**

If you sign any document related to the federal student aid programs electronically using a person identification number (PIN), username and password, and/or any other credential, you certify that you are the person identified by that PIN, username and password, and/or other credential, and have not disclosed that PIN, username and password, and/or other credential to anyone else. If you purposely give false or misleading information, you may be fined up to \$20,000, sent to prison, or both.

Student Signature: _____ Date _____

Print Student Full Name: _____

Print Student Date of Birth: _____

Parent Signature: _____ Date _____
(Required for dependent students only)

Print Parent Full Name: _____

Print Parent Date of Birth: _____

**THIS ORIGINAL SIGNED FORM MUST BE RETURNED FOR PROCESSING
Photocopies & Faxes will not be accepted.**