

Free Application for Federal Student Aid (FAFSA) Signature Page

READ, COMPLETE, SIGN AND DATE

If you are the student, by signing this application you certify that you (1) will use federal and/or state 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 college 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 agree, if asked, to provide information that will verify the accuracy of your completed 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), you certify that you are the person identified by the PIN and have not disclosed that PIN to anyone else. If you purposely give false or misleading information, you may be fined \$20,000, sent to prison, or both.

Everyone whose information is given on this form should complete the information below. The student (and at least one parent, if parent information is given) MUST complete the information below.

STUDENT INFORMATION:

First Name	Middle Initial	Last Name	Social Security Number	Date of Birth
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Student Marital Status

- SINGLE
- MARRIED/REMARIED
- SEPARATED
- DIVORCED/WIDOWED

Month/Year Student was married, separated, divorced or widowed

_____ / _____
 MM/YYYY

Are you Male or Female?

- MALE
- FEMALE

PARENT INFORMATION FOR PARENTS REPORTED ON YOUR FAFSA:

FATHER/STEPFATHER INFORMATION:

First Name	Middle Initial	Last Name	Social Security Number	Date of Birth
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MOTHER/STEPMOTHER INFORMATION:

First Name	Middle Initial	Last Name	Social Security Number	Date of Birth
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Parent's Marital Status

- SINGLE
- MARRIED/REMARIED
- SEPARATED
- DIVORCED/WIDOWED

Month/Year Parents/Stepparents were married, separated, divorced or widowed

_____ / _____
 MM/YYYY

X _____
STUDENT'S SIGNATURE

Date Signed: _____

X _____
FATHER/STEPFATHER'S SIGNATURE

Date Signed: _____

X _____
MOTHER/STEPMOTHER'S SIGNATURE

Date Signed: _____