

INSTITUTIONAL STUDENT INFORMATION RECORD

SIGNATURE PAGE

Award Year: _____

Student Name: _____ SSN: _____

READ, SIGN AND DATE BELOW

By signing below, 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. If you purposely give false or misleading information, you may be fined \$20,000.00, sent to prison, or both.

The student certifies that he/she:

- Will use any federal and/or state student aid funds received during the award year covered by this application solely for educational expenses related to attendance during that year at the institution of higher education that determined eligibility for those funds;
- is not in default on a Title IV educational loan, or has repaid or made satisfactory arrangements to repay his/her loan if he/she is in default;
- does not owe an overpayment on a Title IV educational grant, or he/she has made satisfactory arrangements to repay that overpayment;
- will notify his/her school if he/she does owe an overpayment or is in default; and
- the student and the parent (if dependent) understand that the Secretary of Education has the authority to verify income reported on this application with the Internal Revenue Service and other Federal agencies

Student: _____ Date Signed: _____

Parent: _____ Date Signed: _____