

Student Services Center 235 North National Ave. P.O Box 1940 Fond du Lac, WI 54936-1940 (920) 924-3207, 1-800-472-4554 Fax: 920-924-3421

## **FAFSA Signature Page**

Fill out Completely and Return to the Student Services Center

Student ID	
Name	
READ, SIGN, AND DATE	
By signing this FAFSA signature page, YOU, THE STUDENT, certify that you:	
<ol> <li>will use federal and/or state student financial aid only to pay the coeducation,</li> <li>are not in default on a federal student loan or have made satisfactors.</li> <li>do not owe money back on a federal student grant or have made sa</li> <li>will notify your school if you default on a federal student loan, and</li> </ol>	ry arrangements to repay it,
5. will not receive a Federal Pell Grant from more than one school for t	the same period of time.
By signing this signature page, you certify that all of the information you proknowledge and you agree, if asked:	ovided is true and complete to the best of your
<ol> <li>to provide information that will verify the accuracy of your complete</li> <li>to provide U.S. or state income tax forms that you filed or are require</li> </ol>	
You also certify that you understand that the Secretary of Education has the your application with the Internal Revenue Service and other federal agencies	
If you sign this application or any document related to the federal student a username and password, and/or any other credential, you certify that you a password, and/or any other credential and have not disclosed that usernam anyone else. If you purposely give false or misleading information, you may	re the person identified by the username and e and password, and/or any other credential to
Everyone whose information is given on the FAFSA form should sign below. information is given) MUST sign below.	The student (and at least one parent, if parent
Student Date:	
Parent Date:	