



Financial Aid Priority Deadlines:	
Fall 2016:	06/30/2016
Spring 2017:	11/07/2016
Summer 2017:	03/27/2017

**A. Student's Information (please print)**

_____ Student's Last Name	_____ Student's First Name	_____ Student's M.I.	_____ Student's Social Security Number
_____ Student's Street Address (include apt. no.)			_____ Student's Date of Birth
_____ City	_____ State	_____ Zip Code	_____ Student's Email Address
_____ Student's Home or Cell Phone Number (include area code)			_____ Student's ID Number (if known)

**B. Missing Signature(s)**

**Read, 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 school for the same period of time.

If you are the parent of the student, by signing this application you certify that all of the information you provide 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 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 Personal 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.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**