



ID # _____

2020-2021 Signature Certification Page



115 South Street Middletown, NY 10940
1 Washington Center Newburgh, NY 12550
www.sunyorange.edu/financialaid
finaid@sunyorange.edu
(845) 341-4190

Student Name: _____
(PRINT)

READ, SIGN, and DATE

You and/or your parent did not sign your application for student financial aid. If you and/or your parent complete this certification the SUNY Orange Financial Aid Office will make this correction for you. **Please read this Certification and sign below.**

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 federal income tax return.

Also, you certify that:

1. You will use federal and/or state student financial aid only to pay the cost of attending an institution of higher education.
2. You are not in default on a federal student loan or you have made satisfactory arrangements to repay it.
3. You do not owe money back on a federal student grant or you have made satisfactory arrangements to repay it.
4. You will notify your school if you default on a federal student loan.
5. You will not receive a Federal Pell grant from more than one college for the same period of time.
6. If asked, you will provide tax transcripts and other required documentation that will verify the accuracy of your completed FAFSA.
7. You understand that the U.S. Secretary of Education has the authority to verify income reported on your application with the Internal Revenue Service.
8. If you purposely give false or misleading information, you may be fined \$20,000, sent to prison, or both.

Student Signature: _____ **Date:** _____

★ **Dependent students for financial aid purposes must have at least one parent's signature.**

Parent Signature: _____ **Date:** _____

NOTE: THIS FORM CANNOT BE FAXED OR E-MAILED.

