



ID# _____

2020-2021 Information Sheet

Student Information:

First Name: _____ Last Name: _____
 SS#: _____ - _____ - _____ Date of Birth: ____/____/____
 Marital Status: Single
 (Check one) Married/Remarried Date of Marriage ____/____
 Separated Date of Separation ____/____
 Divorced/Widowed Date of Divorce/Widowed ____/____

Parental Information (for dependent study only):

Parent's Marital Status:

Marital Status: Never Married
 (Check one) Unmarried and living together
 Married/Remarried Date of Marriage ____/____
 Divorced/Separated Date of Divorce/Separation ____/____
 Widowed Date Widowed ____/____

Mother/Stepmother:

First Name: _____ MI _____ Last Name: _____
 SS#: _____ - _____ - _____ Date of Birth: ____/____/____
 State of Residency: _____ Date of Residency: ____/____/____

Father/Stepfather:

First Name: _____ MI _____ Last Name: _____
 SS#: _____ - _____ - _____ Date of Birth: ____/____/____
 State of Residency: _____ Date of Residency: ____/____/____

READ, SIGN, and DATE

This signature page will be attached to your Student Aid Report and authorizes the Financial Aid Office to process and/or correct any incorrect information (as per documentation submitted / verified by undersigned). By signing this signature page you agree, if asked, to provide information that will verify the accuracy of your completed FAFSA. This information may include copies of your U.S. or state income tax forms. Also, you certify that you understand that the Secretary of Education has the authority to verify information reported on the FAFSA with the Internal Revenue Service and other Federal agencies. If you purposely give false or misleading information, you may be fined \$20,000, sent to prison, or both.

If you are the student, by signing this signature page you will 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 any money back on a federal student grant or have made satisfactory arrangements to repay it
4. will notify your school if you default on a student loan.

Everyone whose information is given on the FAFSA **MUST** sign below (the student and at least one parent, if parent information is given).

Student Signature: _____ **Date:** _____

Mother Signature: _____ **Date:** _____

Father Signature: _____ **Date:** _____

