Financial Aid Services

2015-2016
Free Application for Federal Student Aid (FAFSA)
Signature Page

Print Student Name ____________________________________________________________

Valencia ID# ____________________ Phone # ____________________ Date of Birth __________

READ, SIGN, AND DATE BELOW:

If you are the parent or 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 student loan or have made satisfactory arrangement to repay it, (3) do not owe money back on a federal grant or have made satisfactory arrangements to repay it, and (4) will notify your school if you default on a federal student loan. If you are the parent or the student, by signing this application you agree, if asked, to provide information that will verify the accuracy of your completed FAFSA form. This information may include 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 this application with the Internal Revenue Service and other federal agencies. WARNING: If you purposely give false or misleading information, you may be fined $20,000, sent to prison, or both.

EVERYONE WHOSE INFORMATION IS GIVEN ON THE FAFSA FORM SHOULD SIGN BELOW. THE STUDENT (AND AT LEAST ONE PARENT, IF PARENT INFORMATION IS GIVEN) MUST SIGN BELOW. Important: We must receive original signatures on this form. WE CANNOT ACCEPT A FAX.

Student Signature _____________________________ Date Signed _______

Parent/Step-parent signature _____________________________ Date Signed _______

Parent/Step-parent signature _____________________________ Date Signed _______

• Be sure that you, the student, sign where indicated. If you gave your parent(s) financial information, at least one parent MUST sign.
• After your application information is processed, you will receive a Student Aid Report (SAR). If you do not receive your SAR within four (4) weeks, call 1-800-433-3243.
• Once completed and signed, this form should be submitted to Answer Center on your campus or mail to: Valencia College, Office of Financial Aid Services, 1800 S. Kirkman Road, Orlando, Florida 32811

For Staff Use Only
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