

Serving Richmond and Scotland Counties

2021-2022 Certification Page

Student Name:	:			SSN:	
	Last	First	Middle		
Address:					
Р	O Box, Route, or Street		City	State Zip	
Telephone:		E-mail:		Date of Birth:	

Please read carefully, sign and return this form to the Financial Aid Office.

The federal processor has notified the Financial Aid office that required signatures were missing from your Free Application for Federal Student Aid (FAFSA). All information will be reviewed for accuracy, and conflicting information and/or inconsistent information will be corrected. By signing this form, the Financial Aid office will report that the required signatures have been provided and you agree to have all of your corrections sent electronically by Richmond Community College's Financial Aid office.

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 for more than one college for the same period of time.

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

Check one below:

- Check here if you would like to give permission to RichmondCC's Financial Aid office to add their school code to your FAFSA. My DRN is: ______.
- _____ Check here if you would like to give permission to add student and/or parent signature(s) to your FAFSA.

You also 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 electronically sign any document related to the federal student aid programs using an FSA ID (username and password) and/or any other credential, you certify that you are the person identified by the username and password, and/or any other credential and have not disclosed that username and password, and/or any other credential to anyone else. 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 this form should sign below. The student (and at least one parent, if parent information is given) MUST sign below.

Student's Signature (Required):	Date:
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Parent's Signature (Required if Dependent):

Date: