



SIGNATURE PAGE

Financial Aid Office
141 College Drive
Albemarle, NC 28001
Telephone: (704) 991-0302
FAX: (704) 991-0255

Student Name: _____ **Social Security Number:** _____

READ, SIGN AND DATE BELOW

By signing below, you agree, if asked, to provide information that will verify the accuracy of your completed FAFSA. This information may include a copy of your U.S. or state income tax form. 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.**

The student certifies that he/she:

- will use federal and/or state student financial aid only to pay the cost of attending an institution of higher education;
- Is not in default on a federal student loan or have made satisfactory arrangements to repay it;
- Does not owe money back on a federal student grant or have made satisfactory arrangements to repay it;
- Will notify your college if you (the student) default on a federal student loan;
- Will not receive a Federal Pell Grant from more than one college for the same period of time.

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; and if you purposely give false or misleading information, you may be fined up to \$20,000, sent to prison, or both.

THE STUDENT AND ONE PARENT WHOSE INFORMATION IS PROVIDED ON THE FREE APPLICATION FOR STUDENT AID (FAFSA) MUST SIGN BELOW.

Student _____ Date Signed _____

Parent _____ Date Signed _____

This signature page is for FAA Records only and should be returned to the SCC Financial Aid Office located at 141 College Drive, Albemarle, NC 28001.