



## **SIGNATURE PAGE**

Student Name:	Social Security Number:
READ, SIGN AND DATE BELOW	
STUDENT:	
aid only to pay the cost of attending an institute federal student loan or have made satisfactory back on a federal student grant or have made s	u (1) will use federal and/or state student financial tion of higher education, (2) are not in default on a arrangements to repay it, (3) do not owe money satisfactory arrangements to repay it, (4) will notify it loan and (5) will not receive a Federal Pell Grant od of time.
PARENT OR STUDENT:	
verify the accuracy of your completed form. To tax forms that you filed or are required to file. Secretary of Education has the authority to with the Internal Revenue Service and other If you sign any document related to the federal personal identification number (PIN), usernant certify that you are the person identified by the	ou agree, if asked, to provide information that will this information may include U.S. or state income Also, you certify that you understand that the verify information reported on this application or federal agencies.  If student aid programs electronically using a me and password, and/or any other credential, you at PIN, username and password, and/or other sername and password, and/or other credential to
\$20,000, sent to prison, or both.	steading information, you may be fined up to
THE STUDENT AND ONE PARENT WHO: FREE APPLICATION FOR STUDENT AID	SE INFORMATION IS PROVIDED ON THE (FAFSA) MUST SIGN BELOW.
Student	Date Signed
Parent	Date Signed

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

**WARNING:** If you purposely give false or misleading information, you may be fined, sentenced to prison, or both.