



SIGNED SIGNATURE PAGE

READ, SIGN, AND DATE

If you are the student, by signing this form 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, 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 form you agree, if asked, to provide information that will verify the accuracy of your completed financial aid application. This information may include your U.S. federal or state income tax forms. Also, you certify that you understand that the Secretary of Education has the authority to verify information reported on your financial aid application 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.

Everyone whose information is given on this application should sign this form below. The student (and at least one parent, if parent information is given) MUST sign below.

Student Signature

Print Name

Student ID

Date

Parent Signature

Print Name

XXX-XX

Last 4 SS#

Date

Return to: Rowan-Cabarrus Community College –Financial Aid Office
1531 Trinity Church Rd. Concord, NC 28027
EMAIL: fin.aid@rccc.edu
FAX: 704-216-0940