2015-2016 FAFSA SIGNATURE PAGE FORM

_____________________________________                               ________________________________
Student Name                                                                        Student ID Number
_____________________________________                                 ________________________________
Parent Name                                                                          Parent Social Security Number
(For Dependent Students Only)

By signing this application, you hereby affirm that all information reported on this form and any attachment hereto is true, complete, and accurate to the best of your knowledge. You understand that the Student Financial Aid Office at Kent State University will correct the FAFSA application, as necessary, based on the information submitted. You agree that you understand that if you received federal student aid based on incorrect information, you will need to repay it. You may also be required to pay fines and fees. By signing below, 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 from more than one college for the same period of time.

You must provide an original wet signature below. You can mail or bring in this signed page to the Student Financial Aid Office. We cannot accept a scanned or faxed copy of your signature.

______________________________________                    _______________________________________
Student’s Signature                                 Date                           Parent’s Signature                                 Date