

Financial Aid Office 504 E. Main Street, Titusville, PA 16354

Student Name:	Student ID #:
Date:	Last four of SSN:
SAR Certi	ification 2023-24 (FAFSA Signature Page)
state student financial aid only to are not in default on a federal stu do not owe money back on a fede it, (4) will notify your college if	g this application you certify that you (1) will use federal and/or o pay the cost of attending an institution of higher education, (2) ident loan or have made satisfactory arrangements to repay it, (3) eral student grant or have made satisfactory arrangements to repay you default on a federal student loan and (5) will not receive a one college for the same period of time.
you provided is true and complete information that will verify the a your U.S. or state income tax for understand that the Secretary of on this application with the Int any document related to the fed certify that you are the person ide	nt, by signing this application you certify that all the information in to the best of your knowledge and you agree, if asked, to provide accuracy of your completed form. This information may include must that you filed or are required to file. Also, you certify that you feeling that the authority to verify information reported the ernal Revenue Service and other federal agencies. If you sign deral student aid programs electronically using an FSA ID, you entified by that ID and have not disclosed that ID to anyone else, isleading information, you may be fined \$20,000, sent to prison,
	gn the 2023-24 FAFSA. Our office will add the signature is form to our office. Notary is not necessary and faxes,
Student Signature:	Date:
Parent Signature:	Date:

Must be signature of parent that provided

information on the FAFSA