



FAFSA Signature Page: 2023-2024

If you need assistance completing this form please contact the Financial Aid Office at (585) 345-6900 or financialaid@genesee.edu

Student Name: _____ ID/SSN: _____

IMPORTANT: We must receive original signatures. We cannot accept faxed copies.

Instructions: Read, sign, date and submit this form to the Genesee Community College Financial Aid Office:

By signing below, you agree, if asked, to provide information that will verify the accuracy of your completed form. This information may include a Tax Transcript, U.S. or state income tax form. If you purposely give false or misleading information, you may be fined \$20,000.00, sent to prison or both. The student certifies that he/she:

- ☐ Will use any Federal and/or State student aid funds received during the award year covered by this application solely for educational expenses related to attendance during that year at the institution of higher education that determined eligibility for those funds;
- ☐ Is not in default on a Title IV educational loan, or has repaid or made satisfactory arrangements to repay his/her loan if he/she is not in default;
- ☐ Does not owe an overpayment on a Title IV educational grant, or he/she has made satisfactory arrangements to repay that overpayment;
- ☐ Will notify his/her school if he/she does owe an overpayment or is in default;
- ☐ Will not receive a Federal Pell Grant from more than one school for the same period of time;
- ☐ The parent and the student understand that the Secretary of Education has the authority to verify income reported on this application with the Internal Revenue Service and other federal agencies; and
- ☐ If you sign any document related to the Federal student aid programs electronically using an FSA ID, you certify that you are the person identified by the FSA ID and have not disclosed that User ID to anyone else.

Student Signature: _____ Date: _____

Parent Signature (if Dependent): _____ Date: _____

Preparer's Information:

Note: **"Preparer" does NOT mean you, the student, or your parent or spouse.** A "preparer" is another person who filled in the answers for you, or who told you what to fill in on this application. That person must enter his/her Social Security Number or Employer Identification Number below:

Preparer's Certification: All of the information on this form is true and complete to the best of my knowledge.

Preparer's Social Security Number: _____ Employer ID Number: _____

Preparer's Signature: _____ Date: _____