

Signature Page

FRANCISCAN UNIVERSITY OF STEUBENVILLE
1235 UNIVERSITY BLVD.
STEUBENVILLE, OH 43952

2011-2012 Institutional Student Information Record

Student's Printed Name: _____

READ, SIGN, AND DATE AND RETURN TO FRANCISCAN UNIVERSITY

If you are the student, by signing this application you certify that:

1. You will use federal and/or state student financial aid only to pay the cost of attending an institution of higher education.
2. You are not in default on a federal student loan or have made satisfactory arrangements to repay it.
3. You do not owe money back on a federal student grant or have made satisfactory arrangements to repay it.
4. You will notify your school if you default on a federal student loan.

If you are the parent or the student:

1. By signing this application you agree, if asked, to provide information that will verify the accuracy of your completed form. This information may include your U.S. or state income tax forms.
2. By signing this application you certify that you understand that the Secretary of Education has the authority to verify information reported on this application with 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 form should sign below. The student (and at least one parent, if parent information is given) **MUST** sign below.

Student: _____ Date: _____

Parent: _____ Date: _____