



Mail or Hand Deliver to:
Allen Community College Financial Aid Office
1801 N Cottonwood 100 Bloomquist Ave.
Iola, KS 66749 **OR** Burlingame, KS 66413

***** MAIL OR HAND DELIVER COMPLETED ORIGINAL FORM *****

***The U.S. Department of Education highly recommends and encourages you to obtain an FSA User ID, in lieu of completing this document. To do so, the student and at least one parent should visit <https://fsaid.ed.gov>. The student and one parent can then log into the student's FAFSA and use the FSA User ID and the password associated with it, to electronically sign the FAFSA. Be sure to click 'Submit' after completing your electronic signature. This is the fastest way to sign your FAFSA.

Signature Form

Term: _____

READ, SIGN, AND DATE

If you are the student, by signing this application 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 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. Also, you certify that you understand that the Secretary of Education has the authority to verify information reported on this 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 form should sign below. The student (and at least one parent, if parent information is given) **MUST** sign below.

**Electronic signature will not be accepted.*

Student: _____ Date: _____

Student ID Number: _____

Parent: _____ Date: _____