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Signature

Sign and Complete Your Section ⓘ

Summary

This page confirms that you understand the terms and conditions of the FAFSA form and filled out the form accurately to the best of your ability.

The FAFSA form is a legal document you will electronically sign with your account username and password (FSA ID). Because your FSA ID is associated with your personal information, do not share it with anyone.

By signing the student's application electronically using your account username and password, YOU, THE PARENT, certify that all of the information you provided is true and complete to the best of your knowledge and you agree, if asked, to provide

- information that will verify the accuracy of your completed form, and
- U.S. or foreign income tax forms that you filed or are required to file.

You also certify that you understand that the secretary of education has the authority to verify information reported on your application.

If you sign this application or any document related to the federal student aid programs electronically using a username and password, and/or any other credential, you certify that you are the person identified by the username and password, and/or any other credential and have not disclosed that username and password, and/or any other credential to anyone else. If you purposefully give false or misleading information, including applying as an independent student without meeting the unusual circumstances required to qualify for such a status, you may be subject to criminal penalties under 20 U.S.C. 1097, which may include a fine up to \$20,000, imprisonment, or both.

Additionally, by signing this application electronically using your FSA ID, you authorize the U.S. Department of Education to disclose all information you provided on this application, as required under Section 483(a)(2)(D)(i) of the *Higher Education Act of 1965*, as amended, to the institutions identified herein, state higher education agencies (in the student's state of residence and the states in which the institutions identified herein are located), and designated scholarship organizations to assist with the application, award, and administration of federal, state, or institutional financial aid programs and designated scholarship programs. Notwithstanding this authorization, the name of an institution the student selected to authorize such disclosure shall not be shared with any other institution.

Sign Your Section

☒ I, Donna Walker, agree to the terms outlined above.

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Sign