Student Name: ________________________________________  Kean ID#:  _______________

Please 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,
(4) will notify your college if you default on a federal student loan, and
(5) will not receive a Federal Pell Grant from more than one college for the same period of time.

If you are the parent or the student, by signing this application you 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. This
information may include U.S. or state income tax forms that you filed or are required to file. 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 sign any document related to the federal student aid programs electronically using
a personal identification number (PIN), you certify that you are the person identified by the PIN
and have not disclosed that PIN to anyone else. 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 the FAFSA should sign below. The student (and at least
one parent, if parent information is given) MUST sign below.

Student: _________________________________________________   Date: _______________

(Student signature)

Parent: _________________________________________________    Date: _______________

(Parent signature)