



Institutional Student Information Report (SAR Signature Page)

Please read and complete the information requested below:

By signing below, you certify that all the information on this form is true and complete to the best of your knowledge. If asked, you agree to give proof of the information, which may include a copy of your U.S. or State tax form. If you purposely give false or misleading information, you may be fined \$10,000, sent to prison, or both. You also certify that:

- You will use federal student financial 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;
- You are not in default on a Title IV educational loan, or you have repaid or made satisfactory arrangements to repay your loan if you are in default;
- You do not owe an overpayment on a Title IV educational grant, or you have made satisfactory arrangements to repay that overpayment; and
- You will notify your school if you do owe an overpayment or are in default.

Everyone whose information is given on this form must sign below. The student (and at least one parent, if parent information is given) MUST sign below.

FAX only to 314-968-7125

Academic Year: _____

Student Name: (please print) _____

Student Social Security # _____ Date of Birth: _____

Student Signature: _____ Date: _____

Parent Name: (please print) _____ Parent

Signature: _____