

OFFICE OF SCHOLARSHIPS AND FINANCIAL AID

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WWW.FINANCIALAID.CMICH.EDU

2024-2025 FAFSA Correction

Student Name (please print)	Campus ID Number
	causing an incomplete or inaccurate application. Per federal regulations, hout this signed statement along with supporting documentation
Please check the following if you agree:	
I give permission to Central Michigan Unive the FAFSA Processing System (FPS) with use of th	ersity to correct any inaccuracies and resubmit my FAFSA to ne attached supporting documentation.
Certification and Signature(s)	
The College must review the requested information, under the student, by signing this application you certify that you (1) will attending an institution of higher education, (2) are not in defice repay it, (3) do not owe money back on a federal student govour school if you default on a federal student loan and (5) will be period of time. If you are the parent of the student, by signing everify the accuracy of your completed form. This information required to file. Also, you certify that you understand that the reported on this application with the Internal Revenue Service.	ne financial aid program rules (CFR title 34, Part 668). If you are the ll use federal and/or state student financial aid only to pay the cost of fault on a federal student loan or have made satisfactory arrangements grant or have made satisfactory arrangements to repay it, (4) will notify ill not receive a Federal Pell Grant for more than one school for the same g this application you agree, if asked, to provide information that will may include your U.S. or state income tax forms that you filed or are a Secretary of Education has the authority to verify the information e and other federal agencies. If you sign any document related to the dentification Number (PIN), you certify that you are the person ne else.
Student Signature (Handwritten Required OR ELECTRONIC S	SIGNATURE USING GLOBAL ID) Date
Parent Signature (if parent information was required on the (Handwritten OR ELECTRONIC SIGNATURE USING YOUR CRI	