



EGSC Enrollment Management
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Parent Missing Signature Form (PSPAGE)

Insitutional Student Information Report

Student Name: * Student ID: *
 Aid Year: *

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 an FSAID, personal identification number (PIN), username and password, and/or any other credential, you certify that you are the person identified by that PIN, username and password, and/or other credential, and have not disclosed that PIN, username and password, and/or other credential to anyone else. If you purposely give false or misleading information, you may be fined up to \$20,000, sent to prison, or both.

Parent Signature: _____ Date: _____

(Signature lines above provided for use if electronic signature not possible. Please download and print form and return to East Georgia State College for processing.)

(Financial Aid Office Use Only)

KEY_AIDYEAR: * KEY_BANDID: * Processed By: *