



2024-2025 FAFSA Correction Authorization

READ, SIGN, AND DATE

If you are the student, by signing this form 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, and;
4. will notify your school if you default on a federal student loan.

If you are the parent of the student, by signing this application you agree, if asked, to provide information that will verify the accuracy of your completed FAFSA form. This information may include your U.S. federal or state income tax transcripts. Also, you certify that you understand that the Department of Education has the authority to verify information reported on the FAFSA application with the Internal Revenue Service and other federal agencies.

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 2024-2025 Free Application for Federal Student Aid (FAFSA) should sign below. The student (and at least one parent, if parent information is given) MUST sign below. By signing below, I (we) give Claflin University permission to make necessary verification/other corrections to my 2024-2025 FAFSA application.

Student's Printed Name: _____ Claflin ID: _____

Student's Signature _____ Date: _____ SSN XXX-XX- _____

Parent's Signature _____ Date: _____ SSN XXX-XX- _____