



2026-27 FAFSA Parent Spouse Signature Form

Parent Spouse Printed Name _____

Student Name _____

Student ID _____

You are receiving this form because you, the parent spouse, did not sign your Free Application for Federal Student Aid (FAFSA).

All **STUDENTS** read sections I and II and complete the name and signature section at the bottom.

Note: Faxes/copies of signature pages cannot be accepted.

Section I

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, (5) will not receive a Federal Pell Grant for more than one school for the same period of time.

Section II

If you are the parent spouse, by signing this form you agree, if asked, to provide information that will verify the accuracy of the information you provided on your completed FAFSA. This information may include your 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 your FAFSA with the Internal Revenue Service and other Federal agencies. If you sign any document related to the federal aid programs electronically using an FSA ID, you certify that you are the person identified by the FSA ID and have not disclosed that FSA ID to anyone else. If you purposely give false or misleading information on your FAFSA, you may be fined \$20,000, sentenced to prison, or both.

Parent Spouse Signature _____ Date _____