



SWAINSBORO • 346 Kite Road • Swainsboro, Georgia 30401 • Phone (478) 289-2200 • Fax: (478) 289-2263
VIDALIA • 3001 East First Street • Vidalia, Georgia 30474 • Phone (912) 538-3100 • Fax (912) 538-3156

Southeastern Technical College is an Equal Opportunity Institution

2017-2018 ISIR Signature Form

_____ Student's Last Name	_____ First Name	_____ M.I.	_____ Student's Identification (ID) Number
_____ Student's Street Address (include apt. no.)		_____ Student's Date of Birth	
_____ City	_____ State	_____ Zip Code	_____ Student's Email Address
_____ Student's Home Phone Number (include area code)		_____ Student's Cell Phone Number	

Read, Sign, and Date

If you are the student, by signing this application 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, (4) will notify your school if you default on a federal student loan and (5) will not receive a Federal Pell Grant from more than one school for the same period of time.

_____ Student's Signature	_____ Date
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If you are the parent or the student, by signing this application, you agree, if asked, to provide information that will verify the accuracy of your completed form. This information may include your U.S. or state income tax forms. In addition, 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 a Personal Identification Number (PIN), you certify that you are the person identified by the PIN and have not disclosed that PIN to anyone else. If you purposely give false or misleading information, you may be fined \$20,000, sent to prison, or both.

_____ Parent's Last Name	_____ First Name	_____ M.I.	_____ Parent's Social Security Number
_____ Parent's Signature		_____ Date	