



2024-25 FAFSA Signature Page

Office of Student Financial Services - One University Ave - Bourbonnais, IL 60914
Phone: (815) 939-5245

ONU ID # or SSN _____ Date of Birth _____ Phone _____

Student Name _____

Last

First

M.I.

Student Address _____

Street (include apartment #)

City

State

ZIP Code

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 college if you default on a federal student loan, and
5. will not receive a Federal Pell Grant from more than one college for the same period of time.

If you are the parent or the student, by signing this application, you certify that all 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.

You also 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 purposely give false or misleading information, you may be fined up to \$20,000, sent to prison, or both.

The student **MUST** sign and date below. Dependent students **MUST** have at least one parent whose information was provided on the FAFSA also sign and date below.

Student Signature Date

Print Student Name

Parent Signature Date

Print Parent Name

This form **MUST** be submitted to the Office of Student Financial Services. The form can be submitted in person or by mail:

Olivet Nazarene University
Office of Student Financial Services
One University Ave
Bourbonnais, IL 60914

We **MUST** have original signatures. This form **CANNOT** be faxed, emailed, or uploaded!

DO NOT SUBMIT THIS FORM TO THE DEPARTMENT OF EDUCATION