

Office of Financial Aid 1510 Lake Rd | Dyersburg, TN 38024 financialaid@dscc.edu

Fax: 731-286-3354 Phone: 731-286-3350

## 2025-2026 Certification and Signature Form Dependent Student's Parent's Spouse

Student's Name:	Student ID:
Read, Sign, And Date	
If you are the student or the parent, by signing the 2025-2026 FAFSA (Free Application for Feder	g this application you certify that all of the information reported or ral Student Aid) is complete and correct.
If you purposely give false or misleading information	ation, you may be fined, sent to prison, or both.
The student and one parent whose informatio below.	n was reported on the 2022-2026 FASFA must sign and date
Student's Signature:	Date:
Parent's Spouse's Signature:	Date:

When you have completed this form, please return it, along with all requested documents, to the financial aid office. You can either mail (1510 Lake Rd., Dyersburg, TN 38024), fax (731-286-3354), or drop off at any of our 3 locations.

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