

Financial Aid Application Certification

Information and Instructions

As part of your financial aid application, you are required to complete the Financial Aid Application Certification form.

Ink signatures are required from all parties whose information is a part of your application for financial aid. This includes you (the student), your biological or adoptive custodial parent (s) (if applicable) and your spouse (if applicable). You may submit multiple versions of this form as necessary to provide all signatures.

Please submit the completed form to the College of Veterinary Medicine's Director of Student Financial Planning using one of the following methods:

Fax to: (607) 253-4095 or
(607) 253-3709

Email to: vetfinaid@cornell.edu

Mail to: Student Financial Planning
Office of Student and Academic Services
S2009 Schurman Hall
Ithaca, New York 14853

Please contact our office at (607) 253-3766 or vetfinaid@cornell.edu with any questions.

****Financial Aid applications will not be processed until this form is received****

Cornell University
College of Veterinary Medicine
Financial Aid Application Certification

Student Name (Printed)

Cornell ID number (leave blank if unknown)

Date of Birth

IMPORTANT: The following individuals **MUST** read these certifications and sign below: student, both custodial parent(s) (if applicable), and student's spouse (if applicable). Missing signatures will delay the processing of your aid application. If necessary, please submit multiple versions of this form to provide all signatures.

By our signatures, the undersigned (referred to in this document as "student," "parents," and collectively as "we") hereby acknowledge and agree to be bound by the following representations and statements:

- All information in the student's financial aid application is correct at this time and that we will notify the CVM Director of Student Financial Planning promptly, in writing, of any changes in our financial circumstances and provide any other requested information or documentation. We understand that these changes may result in revisions to the student's aid package.
- We understand that if the information we provide is incomplete, inaccurate, misleading, or false, or if admission is revoked, the student may be subject to financial aid award delays or revocation; suspension; expulsion; or other University action, and further that we may be subject to legal consequences.
- We understand that we must furnish signed copies of our tax returns, all supporting schedules, all W-2 forms, all form 1099s, and we agree to provide official IRS transcripts at any time upon request by Cornell University College of Veterinary Medicine.
- We understand that Cornell CVM may withhold or cancel financial aid if we do not provide any requested information.
- We understand that Cornell CVM may verify the accuracy of any information we provide.
- We understand that information provided on the financial aid application and other documents may be shared with the following: the applicant, other agencies from which we are requesting aid, and with donors. We also understand that if Cornell CVM determines we have provided information that is or may be inaccurate, misleading or false, Cornell CVM may share our financial aid information with appropriate state and federal agencies.
- We authorize Cornell University CVM to release our financial aid information electronically.
- The student understands that if s/he is a Title IV federal aid recipient, this aid will be credited to the student's account to cover all educational expenses. Such expenses may include, but are not limited to, tuition, fees, room and board, and items such as extra course fees and the student health insurance plan. If the student elects to have federal aid credits limited to tuition, fees, and room and board, the student will notify the CVM Director of Student Financial Planning, in writing, to this effect.
- We understand that the sources of financial aid funding for which the student is eligible may be limited if all required financial aid application materials are not postmarked or submitted online by the listed deadline.

Ink signatures are required from ALL applicable parties.

Signature of Student

Date

Signature of Student's Spouse (if applicable)

Date

Signature of Custodial Parent 1

Date

Are you a step-parent?

Yes

No

Signature of Custodial Parent 2

Date

Are you a step-parent?

Yes

No