



## COLLEGE SCHOLARSHIP VERIFICATION REQUIREMENTS

The Scholarship Officer or designated official must review each scholarship application and determine

---

---

---

---

---

---

---

---

---

# STUDENT CERTIFICATION

All of the information on this form is true and complete to the best of my knowledge. I hereby give the community college permission to release this information to any agency necessary for the processing or funding of my aid application.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature (Dependent Students Only)

\_\_\_\_\_  
Date

## California Information Privacy Act

State and federal laws protect an individual's right to privacy regarding information pertaining to oneself. The California Information Practices Act of 1977 requires the following information be provided to financial aid applicants who are asked to supply information about themselves. The principal purpose for requesting information on this form is to determine your eligibility for financial aid. The Chancellor's Office policy and the policy of the community college to which you are applying for aid authorize maintenance of this information. Failure to provide such information will delay and may even prevent your receipt of financial assistance. This form's information may be transmitted to other state agencies and the federal government if required by law. Individuals have the right of access to records established from information furnished on this form as it pertains to them. The officials responsible for maintaining the information contained on this form are the financial aid administrators at the institutions to which you are applying for financial aid. The SSN may be used to verify your identity under record keeping systems established prior to January 1, 1975. If your college requires

