

RETURN TO:

2009-2010

SIERRA COLLEGE

Financial Aid 5000 Rocklin Rd

Rocklin CA 95677

916 660-7310 Fax 916 630-4541

Name of Financial Aid Applicant (Please print)

Last First Middle

Student ID Number:

AGENCY CERTIFICATION FORM - UNTAXED INCOME

Federal and state regulations relative to student financial aid mandate coordination and verification of all family financial resources. The information provided below will be used only to determine financial aid eligibility and will be kept confidential by the campus pursuant to Sections 76200-76246 of the California Education Code and the 1974 Family Education Rights and Privacy Act.

TO BE COMPLETED BY THE STUDENT AND SPOUSE, IF APPLICABLE, AND/OR PARENT BEFORE SUBMITTING TO AGENCY
I authorize the appropriate office/agency to provide the information requested by the school listed above.

Form section for student and spouse completion, including fields for Case Name, Case Number, Applicant's Signature, Mother's Signature, Applicant's Spouse's Signature, Father's Signature, and various benefit checkboxes.

TO BE COMPLETED BY THE AGENCY PROVIDING BENEFITS

Form section for agency completion, including checkboxes for assistance status, a table for benefit amounts (Total 2008 vs Current Monthly Amount), and questions about anticipated changes and transportation benefits.

Form section for Agency Representative completion, including fields for Name, Title, Signature, Date, and Phone Number.

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...

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 the record keeping systems established prior to January 1, 1975.