

Parent/Stepparent signature (Required if dependent)

2023-24 Signature Submission Office of Financial Aid

Station 20 | 1500 S Ave K | Portales, NM 88130

Phone: 575.562.2194 | Fax: 575.562.2198 | financial.aid@enmu.edu

Student Information				
ENMU ID number:	SSN:	Phone:	Phone:	
Student name: Last:	First:	Middle initial:		
Mailing address:	City:	State:	ZIP:	
Read, Sign and Date				
 If you are the student, by signing only to pay the cost of attending a loan or have made satisfactory ar or have made satisfactory arrang- loan and (5) you will not receive a 	an institution of higher education rangements to repay it, (3) you do ements to repay it, (4) you will no	a, (2) you are not in defau o not owe money back or tify your college if you d	ılt on a federal student n a federal student grant efault on a federal student	
If you are the parent or the studer complete to the best of your know of your completed form. This info to file. Also, you certify that you u reported on this application with sign any document related to the any other credential, you certify t credential, and have not disclosed purposely give false or misleadin	viedge and you agree, if asked, to bright the include U.S. or state and erstand that the Secretary of Ethe Internal Revenue Service and federal student aid programs usinhat you are the person identified that username and password ar	provide information that income tax forms that ducation has the author other federal agencies. In gan FSA ID (username by that username and pad/or other credential to	t will verify the accuracy you filed or are required rity to verify information If you electronically and password) and/or assword and/or other anyone else. If you	
The student (and at least one parent	/stepparent, if dependent studen	t) must sign below.		
Student signature		Date		

Date