



**Chaffey College Office of Financial Aid
2020-2021 Statement of Fact information**

Please complete the section that satisfies your verification requirements.

Student Name: _____

Student ID Number: _____

High School Diploma-Equivalency Statement

I have a high school diploma

I have a GED

I previously passed a Department-Approved ability-to-benefit test (ATB).

I was previously determined to have passed six credits of college work that are applicable to a degree or certificate offered by Chaffey College.

I have passed a High School Proficiency exam (please note the CA certificate of completion is not eligible)

Name of school or institution received from: _____

Date that diploma/certificate was received: _____

BA-BS Degree Resolution

When you filed your FAFSA, you either left the bachelor's degree question blank, reported that you have a bachelor's degree and/or that you are currently enrolled for the purpose of obtaining a degree beyond a bachelor's. There is conflicting information with the information you reported on your FAFSA. Please complete the following:

At the beginning of the 2020-2021 award year, will you be working on a master's or doctorate degree?

Yes

No

I have a bachelor's degree or will receive one before July 1, 2020?

I do not have a bachelor's Degree

Warning: If you purposely give false or misleading information on this form, you may be fined, be sentenced to prison, or both

Business

Do you or your parents have a business which employs 100 or more full-time employees?

Yes

No

If yes, please indicate the net worth of that business: _____

Other

"C-Code" is coming up on current FAFSA for citizenship that is already in students file.

What year was proof of citizenship submitted to the Financial Aid office?

Academic year: _____

Cancel My Awards

Please cancel my awards for the 20-21 academic year.

I certify, under penalty of perjury, that the information reported on this form and any attachments hereto is true, complete, and accurate to the best of my knowledge. I understand that any false statements or misrepresentation will be cause for denial, reduction, withdrawal, and/or repayment of financial aid.

Signature:

Date:
