

Student Statement

STUDENT ID	STUDENT LAST NAME	STUDENT FIRST NAME	PHONE NUMBER (with area code)
PLEASE PRINT IN BLACK INK			

CERTIFICATION & SIGNATURE(S)

By signing this worksheet, I certify that all the information reported on it is complete and correct.

Student Signature _____ Date _____

WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.

FOR OFFICE USE

Comments: _____

_____ BY: _____ DATE: _____