

**2011-2012 CSB/SJU Financial Aid Application**

**Returning Student Certification Page**

*Print, sign, and send this form to the CSB or SJU Financial Aid Office*

**For tax filers, please send the following documents with this Certification:**

\_\_\_\_\_ **Parents' 2010 federal tax return (signed) and schedules A**

\_\_\_\_\_ **Parents' 2010 W-2(s)**

\_\_\_\_\_ **Student's 2010 federal tax return (signed)**

\_\_\_\_\_ **Student's 2010 W-2(s)**

By signing below, you certify that the information provided on the CSB/SJU Financial Aid Application is complete and correct. In accordance with federal regulations, if you purposely give false or misleading information on the FAFSA or the CSB/SJU Application, you may be fined, sentenced to jail or both. At least one parent must sign in addition to the dependent student.

\_\_\_\_\_  
*Student's Name (please print)*

\_\_\_\_\_  
*Banner ID*

\_\_\_\_\_  
*Student's signature*

*Date*

\_\_\_\_\_  
*Spouse's signature*

*Date*

\_\_\_\_\_  
*Father's/stepfather's signature*

*Date*

\_\_\_\_\_  
*Mother's/stepmother's signature*

*Date*

Please send this certification page along with copies of the parents' and student's federal tax return and W-2s to the CSB or SJU Financial Aid Office. The preferred method for sending these documents is via e-mail to the appropriate e-mail address below. You may also send them via U.S. mail, fax, or drop them off at our office.

**CSB:**

E-mail: [csbfinaid@csbsju.edu](mailto:csbfinaid@csbsju.edu)

College of Saint Benedict  
Financial Aid Office  
37 S. College Avenue  
St. Joseph, MN 56374-2099  
(320) 363-5388  
(800) 544-1489  
Fax: (320) 363-6090

**SJU:**

E-mail: [sdirkes@csbsju.edu](mailto:sdirkes@csbsju.edu)

Saint John's University  
Financial Aid Office  
P.O. Box 5000  
Collegeville, MN 56321-5000  
(320) 363-3664  
(800) 544-1489  
Fax: (320) 363-3102