



Financial Aid Office

125 South 2nd St. Arkansas City, KS 67005
Phone: 620.441.5304 | Fax: 620.441.5575
Email: financialaid@cowley.edu

Cowley College 2025-2026 Student Certification Form

Student Name: _____

Student ID: _____

A: Your Degree

Please list the Degree or Certificate Program you are working on.

- If you need to declare a degree, please contact your advisor or an Admissions Representative at 620.441.6335. You can find the list of approved degrees at, [www.cowley.edu Programs and Degrees](http://www.cowley.edu/Programs%20and%20Degrees).
- Listing **undecided** is not accepted while receiving Title IV federal financial aid; grants, direct student loans, and/or work study

B. Your High School/GED Completion- Please send your official transcript to the Registrar's office

| | | |
|-----------------------------|--------------|----------------|
| | | |
| High School/GED Center Name | City & State | Year Graduated |
| | | |
| Home/Online School | City & State | Year Completed |

C. Certification and Signatures

CORRECTION/ELECTRONIC FILE AUTHORIZATION

By signing below, I, the student, understand that I am responsible for checking my Cowley email and Financial Aid Portal regularly.

I also authorize Cowley College to make all corrections necessary to process my Student Aid Report (SAR).

All of the information on my FAFSA/SAR is true and complete to the best of my knowledge. I understand that if I purposely give false or misleading information on the FAFSA, I may be subject to a fine, a prison sentence, or both.

Everyone whose information is on the FAFSA must sign below - the student and at least one parent (if parental information is required).

Student _____ Date _____

Parent / Spouse _____ Date _____