2024-25 Statement of Corrections

Student Name: ________________________________  Student ID: ____________________

Any discrepancy/change in any item between the SAR/ISIR and the Student Family Size Verification Form for ESCC requires a signed written statement from either the student and/or the student’s parent/spouse.

______ I am aware that any changes I make could affect the amount of financial aid I may be eligible to receive.
Initials


The person (student/spouse/parent) making the above corrections must print their name, sign and date the form below.

Student’s Signature: ________________________  Date: ____________________________

Spouse’s Printed Name: _____________________  Spouse’s Signature/Date: ________________

Parent’s Printed Name: ______________________  Parent’s Signature/Date: ________________

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