2009-2010 FIRST GENERATION MATCHING GRANT STUDENT AFFIDAVIT
FIRST GENERATION MATCHING GRANT PROGRAM
FLORIDA STATUTE 1009.701

This section to be filled out by the student

I, _____ certify that, to the best of my knowledge and belief, I am a first
(Name)
generation college student. Neither of my parents, or the parent with whom I regularly reside and receive support, has earned a college degree at the baccalaureate level or higher. The term "parent" means the natural or adoptive parent or legal guardian of a dependent child [F.S. 1009.21(1)(d)].
Students who knowingly make false statements in order to receive state financial aid awards shall be guilty of a misdemeanor of the second degree subject to the provisions of s. 837.06 and shall be required to return all state financial aid awards wrongfully obtained [F.S. 1009.40(1)(a)3].

_____
(Student Signature)

This section to be completed by the Notary Public

STATE OF)
)
COUNTY OF)

I, _____, a Notary Public in and for this jurisdiction, certify that

_____(name of the person signing above), who is known to me to be the person signing

this First Generation Matching Grant Program Student Affidavit, personally appeared before me this jurisdiction.

IN WITNESS WEREOF, I sign below and set my official seal on this document on

_____, 20 _____.

_____
(Signature)

_____
(Name printed or typed)