

In order to receive further consideration for a Cal Grant award, you must complete all questions, sign and return this form to CSAC within 30 days of the date of your letter. If you are not eligible for a Cal Grant Transfer Entitlement award, you may be considered for a Competitive Cal Grant award, but only if you complete and return this form within 30 days. Faxed copies of the completed form will not be accepted. **DO NOT LEAVE ANY QUESTION BLANK.**

Instructions for filling out the Student Certification section:

When completing this form, please print clearly using black ink only.

Answer each question by filling in the response or checking the appropriate box as it applies to your situation.

1. Print your name as it appears on your Social Security card. Enter your first name, middle initial and last name. Print your Social Security number as it appears on your Social Security card or your CSAC ID as it appears on your CSAC notification letter.
2. Print the month and year you graduated from high school or achieved the equivalent by passing the GED/HiSET/TASC or California High School Proficiency Examination (CHSPE). For example: June 2011. If you did not graduate High School or obtain the equivalent (GED/HiSET/TASC/CHSPE) please write 'Did Not Graduate' on the line provided.
3. Mark this box **only if** you were a California resident at the time of high school graduation but graduated from a high school outside of California due to you or your parent or guardian's military orders from the United States Armed Forces. If you graduated from a California high school, leave this box empty.
4. Print the name of the high school from which you graduated. If you completed high school by passing the GED/HiSET/TASC, or the California High School Proficiency Examination (CHSPE), please write in "GED", "HiSET", "TASC", or "CHSPE".
5. If you graduated high school or completed high school by passing the GED/HiSET/TASC, or CHSPE please enter the city and state of graduation/completion.
6. If you applied for Cal Grant by completing the Dream Act Application, please print the date you started living in California. Otherwise, please print the date you became a California resident. If you have resided in California since your birth, please put your date of birth.
7. If you attended College during the 2014-15 academic year, please list that College on the line provided. If you did not attend college in 2014-15, please enter "Did Not Attend".
8. Print the name of the College you expect to attend during the 2015-16 academic year. For example, CSU Humboldt.

Signature: By signing this form, you certify that you have read the instructions and the information you provided is correct. It is illegal to report false or misleading information on this form and doing so may result in any Cal Grant award being revoked and CSAC potentially seeking repayment of any grant amount that is obtained based on the submission of inaccurate information.

For more information on filling out this form or for questions on Cal Grant eligibility, contact CSAC at (888) 224-7268 or by email at studentsupport@csac.ca.gov.

Faxed copies of this completed form will not be accepted.
Mail completed forms to:

California Student Aid Commission
Cal Grant Operations Branch
PO Box 419028
Rancho Cordova, CA 95741-9028

