

2025-2026 Miscellaneous Self Certification Form

Last Name	First Name	MI	Student ID	Date of Birth
on this form to u	id Office at San Bernard pdate your 2025-2026 F Diploma—Equivalen	AFSA Applicat		ation you provide
I hav	ve a high school diploma frowhich I received on:	om:(To be used t	o correct FAFSA only)	
I hav	ve a GED from:	W	rhich I received on:	(To be used to correct FAFSA only)
	ended college prior to July 1 Proof must be provided to the			proved ability-to-benefit test (ATB).
			eviously determined to have San Bernardino Valley Colle	passed six credits of college work that are ege.
	'es No (ch		ease note the CA certificate	of completion is not eligible)
Do you (or y employees?		our parent(s) (if D	ependent) have a business w	which employs 100 or more full-time
If yes, plea	ase indicate the net worth of	that business: \$		
Declining Fina	ancial Aid			
Plea	ase cancel my award(s) for	the <u>2025-2026</u> aw	ard year.	
<u>Other</u>				
	cumentation is being reques previous award year.	ted based on the in	nformation I provided on my	FAFSA that I have submitted during a
Certification ar	nd Signature			
	•		rmation reported is com	plete and correct. WARNING: If you ison, or both.
Student's Signature		_	Date	-