

CCTCMIS

Student Annual Financial Aid Data Submission **Certification Form**

IMPORTANT: This form must be signed by the President or by an authorized designee. Anyone signing as an authorized designee must be listed on the Authorized Signature Form that is on file.

Return the signed and scanned form to CCTCMIS via TIBCO using the file naming convention CCxx.SDB.CERTIFY.T4Eyyyy.PROD.pdf where xx is the college number and yyyy is the reporting year (e.g., College 01 would submit the certification using the name CC01.SDB.CERTIFY.T4E2018.PROD.pdf for the 2017-18 reporting year).

to the 2017 10 reporting year,		
IMPORTANT: If the filename is not in accordance with the above naming convention, it will be rejected.		
College Name (Enter full college name)		
Reporting Year (e.g., 2017-18)		
By signing below the above named institution certifies that their submitted data, as represented within the verification reports produced by CCTCMIS and reviewed by the college, provides a complete and accurate representation of the college to the best of their knowledge, with any exceptions explained below.		
Financial Aid	YES	NO
Explanation (Enter any necessary explanations below. Provide spe	ecific details.)	
Approver		Approver's Title
Approver's Signature		Date Signed
Submitter		Submitter's Phone Number