



Office of Student Financial Aid and Scholarship Services  
MSC 5100  
New Mexico State University  
P. O. Box 30001  
Las Cruces, NM 88003-8001  
Phone: 505-646-4105  
Toll Free: 877-278-8586

## Certification of Birth Date 2007 – 2008

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Student's Name

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Banner ID Number

Please give information for:  Student  Parent

I, \_\_\_\_\_, certify that:

My date of birth as stated on my birth certificate is:

Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**Certification Warning:** Any person who knowingly makes a false statement or misrepresentation on this form is subject to penalties which may include fines or imprisonment under the United States Criminal Code and 20 U.S.C. 1097.

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Student Signature

Date

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Parent Signature (if applicable)

Date