

STUDENT NAME:

Please complete in blue or black ink if possible. Typed signatures will not be accepted.

Student Financial Services

P 206-281-2061 or 800-737-8826 (toll free)

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3307 Third Avenue West, Suite 114, Seattle, Washington 98119

SPU.EDU/SFS

BIRTHDATE / NAME / SSN VERIFICATION FORM

SPU ID:

(SSA) database. The Nam did not match the informati	e, Birthdate, or Social Śecu on on file with the SSA, or y	r FAFSA and the Social Security Adi urity Number (SSN) you reported on your enrollment record with SPU. Yo u	the FAFSA
to resolve this discrepand	cy before we can process	your financial aid application.	
Login to your <u>FAFSA</u> and ve	erify the information you sub	omitted.	
1. If the information is corr	ect contact <u>Social Security</u>	Administration to have your records u	updated.
	orrect on your FAFSA: ur signed Social Security Ca	ard	
_	h is incorrect on your FAF ur Birth Certificate, valid Driv		
Attach a copy of you	correct on the FAFSA: ur current SSN Card AND, documentation for the name	ne discrepancy (marriage certificate, o	court
lf you lost your Social Secur Social Security website.	ity Card, changed your nam	ne or need a replacement, visit the	
Please print your current	legal name as it appears o	on your Social Security Card:	
I am confirming the following	j :		
FAFSA and the Social Secu information reported on it is this document, it will be cau	rity Administration. By signir complete and correct. If I pu se for denial or repayment o	ct between the information reported ong this document, I certify that all the urposely give false or misleading information student aid and I/we may be fined, be United State Criminal Code.	rmation on
Student Signature	Date	Email	