



**Fresno City College
Financial Aid Office**
1101 E University Ave
Fresno, CA 93741
Phone: (559) 442-8245
Fax: (559) 499-6024

PARENT INFORMATION REQUEST # 10

STUDENT NAME: _____ ID#: _____

Your Student Aid Report (SAR) has missing or incomplete parental information. In the spaces below, provide your parents' names, social security numbers, and dates of birth. If a parent is divorced, single, separated, or widowed, only provide information for the parent whose income you reported on your Free Application for Federal Student Aid (FAFSA). **If your parents do not have Social Security Numbers, enter all zeroes.**

A. Parent 1's (father/mother/stepparent) Information:

1. Parent 1's full name (as it appears on the Social Security Card):

First	Middle	Last
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2. Parent 1's Social Security Number: _____ - _____ - _____

3. Parent 1's Date of Birth: _____ / _____ / _____

B. Parent 2's (father/mother/stepparent) Information:

1. Parent 2's full name (as it appears on the Social Security Card):

First	Middle	Last
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2. Parent 2's Social Security Number: _____ - _____ - _____

3. Parent 2's Date of Birth: _____ / _____ / _____

- C. Parents' Current Marital Status: Married/Remarried Divorced or Separated
 Single Widowed Unmarried and both parents living together

- D. Date of Marital Status (Month / Year): _____ / _____

We certify that this information is true and correct and we authorize the Financial Aid Office to make corrections to add this information to the SAR.

Student Signature	Date	Parent Signature	Date
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