



2013-2014 SOCIAL SECURITY/NAME/DATE OF BIRTH CONFIRMATION FORM

STEP 1: STUDENT INFORMATION

Please complete this verification form and provide copies of all requested paperwork within **15 days** of receipt to Governors State University. **Incomplete paperwork will not be accepted, thereby delaying the processing of your financial aid award.**

Student Name:			GSU ID #		Last 4 digits of SS#:	
Please Print	Last	First			2400 1 449.00 01 00.01	
Permanent Home Address:						
	City			State	Zip Code	
Student's Date of Birth:		Home Pho	Home Phone #:		Cell #:	
Email Address:		@student.govst.	edu			
STEP 2: SOCIAL	SECURITY/NAME	/DATE OF BIRTH	I VERIFICATIO	ON		
Education was unabirth certificate ar	able to confirm your nd your social securit	legal name, social so	ecurity number a of Student Finan	and/or date of cial Aid (OSFA	Aid (FAFSA), the U.S. Department of birth. Please submit copies of your A). If your name was legally changed, necessary correct your FAFSA	
Return this origina	al form to our office a	along with the follow	wing documentat	tion (please c	heck):	
and	and					
Only if Applicable	2:					
	 □ Copy of court document for legal name change □ Marriage Certificate 					
I certify that all in	ATION STATEMENT formation reported o tion will be cause for	n this document is			understand that any false statements of financial aid.	
Student's Signatur	re	Date		misleadi	G: If you purposely give false or ing information on this worksheet, you ined, be sentenced to jail, or both.	