2017-2018

Social Security Number Resolution

Student ID_____

_____   _____

Last Name   First Name

The Social Security Administration (SSA) did not confirm that the Name, Date of Birth, or Social Security Number (SSN) you reported on your FAFSA is correct. Please complete this form and return along with **a CLEAR COPY of your Social Security Card** to Pasadena City College's Financial Aid Office.

Student's Full Name as it appears on your Social Security Card

Last Name_____   First Name_____

Social Security Number_____   Date of Birth_____

Father/StepFather's Full Name as it appears on their Social Security Card

Last Name_____   First Name_____

Social Security Number_____   Date of Birth_____

Mother/StepMother's Full Name as it appears on their Social Security Card

Last Name_____   First Name_____

Social Security Number_____   Date of Birth_____

[ ]

If the Name, Date of Birth, and/or SSN reported for you or your parent's on your FAFSA are/is correct, please contact the SSA at 1-800-772-1213 or www.socialsecurity.gov to update your SSA records. Once your records have been updated, place a check mark in the box to the left, and submit this completed form to Pasadena City College's Financial Aid Office along with a CLEAR COPY of your Social Security Card.

I understand that by signing this form I agree, if asked, to provide information that will verify the accuracy of the completed form. I also certify that I understand that Pasadena City College's Office of Financial Aid has the authority to verify information on this form with other federal and state agencies. I further understand that if I purposely give false or misleading information I may be fined up to $20,000, sent to prison, or both.

Student's Signature_____   Date_____

Parent's Signature_____   Date_____