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

PARENT INFORMATION REQUEST

STUDENT NAME: _____ ID#: _____

Your Student Aid Report (SAR) has incorrect 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

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

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 or add this information to the SAR. **Digital and/or typed signatures are not acceptable.**

_____   _____
Student Signature   Date   Parent Signature   Date

FF22CPAR   12/15/2021