



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

## #9 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.

\_\_\_\_\_  
 Student Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Parent Signature

\_\_\_\_\_  
 Date