

## 2022 - 2023 Verification of Identity and Social Security Number

Name (Last, First):	Email:	
Date:	Cell Phone	e #:
match the social security numb	received your <i>Free Application for Federal</i> per and/or date of birth reported on the FAF ee following form to assist in matching your	SA to your application for admission.
SECTION A: Government-Issued Identification		
Photo Identification		
	Attach Original Document He	ere
	Social Security Car	r <b>d</b>
	Attach Original Document He	re
Social Security Number:		
SECTION B: Signature(s		
By signing this form, you certify that all of provide information that will verify the account of the second of th	the information you provided is true and complete to the be curacy of your completed form.	est of your knowledge and you agree, if asked, to
Student Name (print)	Signature	Date
(This form requires handwritten signature	es. Photocopies of handwritten signatures are permitted.	Electronic, or typed, signatures will not be accepted.)

Please e-mail, mail, or deliver this form in person to the address below. Please write your ID# on attached or supporting documents.

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