



OFFICE OF STUDENT FINANCIAL AID

DOBVM
2008-2009

Panther ID Number							

DATE OF BIRTH VERIFICATION (MOTHER) 2008-2009

Your 2008-2009 Free Application for Federal Student Aid (FAFSA) contains conflicting information involving your parent's information i.e. name, social security number, and/or date of birth. Please provide verification.

Student's Last Name	First	MI

INSTRUCTIONS: Student's mother or stepmother must complete this form. In the space below please print your name, social security number, and date of birth. To verify that this information is correct please submit a copy of one of the following documents as proof:

- Driver's License
 Baptismal Record
 Birth Certificate
 Passport

Mother's Name _____

Social Security Number _____ - _____ - _____ Date of Birth _____ / _____ / _____

CERTIFICATION STATEMENT

"I certify that this information is true and correct to the best of my knowledge."

Mother's Signature _____ Date _____

Street Address _____ Apt/Suite No. _____

City _____ State _____ Zip Code _____

FAILURE TO COMPLETE THIS FORM AS DIRECTED WILL RESULT IN THIS FORM BEING RETURNED TO YOU.

Return this form to: OFFICE OF STUDENT FINANCIAL AID
P.O. Box 4040 Atlanta GA 30302-4040
Phone: 404-413-2400 Fax: 404-413-2102

ONE STOP SHOP
Sparks Hall.....rooms 227 and 228
Kell Hallroom 292
Hours: Monday – Friday from 8:30am to 5:15pm

FOR OFFICE USE ONLY

Action Taken: Approved Disapproved

Reviewed By: Initials _____ Date _____