

Parent Information

Student Name (Please Print Legibly)

Student Social Security # or Student #

The Student is required to submit the information requested below for at least one of the parents/step-parents the student identified on the Free Application for Federal Student Aid (FAFSA) for the school year 2012-2013. This should be the parent/step-parent that the student currently resides with, or most recently resided with.

ATTACH A COPY OF THE PARENT(S)/STEP-PARENTS(S) SOCIAL SECURITY CARD TO THIS FORM. FAILURE TO PROVIDE THIS INFORMATION WILL CAUSE THE STUDENT APPLICATION TO NOT BE PROCESSED.

At a minimum, information and signature of at least one parent/step-parent is required.

The following information for your parent(s) is required to complete your financial aid application. Please complete all applicable sections below with current information and return to FTCC Financial Aid.

Father/Stepfather Information

Father/Stepfather Full Name _____

Father/Stepfather Address _____

Father/Stepfather City, State, Zip _____

Father/Stepfather Date of Birth _____

Father/Stepfather Social Security # _____

Include copy of Social Security Card _____

(enter all zero's if None) _____

Father/Stepfather Signature

Date

Mother/Stepmother Information

Mother/Stepmother Full Name _____

Mother/Stepmother Address _____

Mother/Stepmother City, State, Zip _____

Mother/Stepmother Date of Birth _____

Mother/Stepmother Social Security # _____

Include copy of Social Security Card _____

(enter all zero's if None) _____

Mother/Stepmother Signature

Date

SEE BACK PAGE FOR ADDITIONAL INFORMATION

Additional Information

	Yes	No	Amount
Received Supp Security Income	<input type="checkbox"/>	<input type="checkbox"/>	\$
Received Food Stamps	<input type="checkbox"/>	<input type="checkbox"/>	
Received Lunch Benefits	<input type="checkbox"/>	<input type="checkbox"/>	
Received TANF Benefits	<input type="checkbox"/>	<input type="checkbox"/>	\$
Received WIC Benefits	<input type="checkbox"/>	<input type="checkbox"/>	

Parent's Marital Status Information

Married/Separated/Divorced/Widowed: _____

Marital Status Date: _____

State of Residency: _____