



Please complete in blue or black ink if possible. Typed signatures will not be accepted.

Student Financial Services

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SPU.EDU/SFS

2024 - 2025 BIRTHDATE / NAME / SSN VERIFICATION FORM

STUDENT NAME: _____ SPU ID: _____

There was a conflict between the information on your FAFSA and the Social Security Administration (SSA) database. The Name, Birthdate, or Social Security Number (SSN) you reported on the FAFSA did not match the information on file with the SSA. **You will need to resolve this discrepancy before we can process your financial aid application.**

Login to your [FAFSA](#) and verify the information you submitted.

1. If the information is correct contact [Social Security Administration](#) to have your records updated.

- **If your SSN is incorrect** on your FAFSA:
Attach a copy of your signed Social Security Card
- **If your Date of Birth is incorrect** on your FAFSA:
Attach a copy of your Birth Certificate, valid Driver's license, or Passport.
- **If your Name is incorrect** on the FAFSA:
Attach a copy of your current SSN Card AND,
Attach a copy of the documentation for the name discrepancy (marriage certificate, court order, ect.)

If you lost your Social Security Card, changed your name or need a replacement, visit the [Social Security website](#).

Please print your current, legal name as it appears on your Social Security Card:

I am confirming the following:

I have attached the documentation to resolve the conflict between the information reported on the FAFSA and the Social Security Administration. By signing this document, I certify that all the information reported on it is complete and correct. If I purposely give false or misleading information on this document, it will be cause for denial or repayment of student aid and I/we may be fined, be sentenced to prison, or both, under the provisions of the United State Criminal Code.

Student Signature

Date

Email