MADERA COMMUNITY COLLEGE 2021- 2022 PARENT INFORMATION REQUEST #10

Madera CCC: (559) 675-4800
Oakhurst CCC: (559) 683-3940
Fax: (800) 643-0518
Email: mc.finaid@scccd.edu

STUDENT NAME:_____ ID#:_____

ADDRESS:_____ PHONE #: _____

Your Student Aid Report (SAR) has missing or incomplete parent information. In the spaces below, provide your father's and mother's names, social security numbers, and dates of birth. If your parent is divorced, single, separated, or widowed, only provide information for the parent whose income you should report on your Free Application for Federal Student Aid (FAFSA). **If your parent(s) does not have a Social Security Number, enter all zeroes.**

A. Parent's Marital Status: ☐Married or remarried ☐Divorced or Separated
☐Single ☐Widowed
☐Unmarried and both parents living together

B. Date of Current Marital Status (Month/Year):_____/_____

C. Father/Step Father's Information:

1. Father/Step Father's full name (as it appears on his Social Security Card):

_____
First Middle Last

2. Father/Step Father's Social Security Number:_____-_____-_____

3. Father/Step Father's Date of Birth:_____/_____/_____

D. Mother/Step Mother's Information:

1. Mother/Step Mother's full name (as it appears on her Social Security Card):

_____
First Middle Last

2. Mother/Step Mother's Social Security Number:_____-_____-_____

3. Mother/Step Mother's Date of Birth:_____/_____/_____

E. What is your parents' state of legal residence? _____

F. Enter the month & year of legal residency for the parent who has lived in the state the longest if it was not before January 1, 2016._____/ _____

We certify that this information is true and correct and we authorize the Financial Aid Office to make corrections to add this information to the SAR.

_____ _____
Student Signature Date Parent Signature Date