

FAFSA™

July 1, 2014 – June 30, 2015

FREE APPLICATION for FEDERAL STUDENT AID

Federal Student Aid

FAFSA is a part of the
FEDERAL STUDENT AID PROGRAM

Step One (Student): For questions 1-31, leave blank any questions that do not apply to you (the student). OMB # 1845-0045

Your full name (exactly as it appears on your Social Security card). If your name has a suffix, such as Jr or III, include a space between your last name and suffix.

1. Last name	<input type="text"/>	2. First name	<input type="text"/>	3. Middle initial	<input type="text"/>
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Your mailing address

4. Number and street (include apt. number)

5. City (and country if not U.S.)	<input type="text"/>	6. State	<input type="text"/>	7. ZIP code	<input type="text"/>
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8. Your Social Security Number. See Notes page 2.

<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>
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9. Your date of birth:

MM	DD	YYYY
<input type="text"/>	<input type="text"/>	<input type="text"/>

10. Your permanent telephone number:

(<input type="text"/>)	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
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Your driver's license number and driver's license date (if you have one)

11. Driver's license number	<input type="text"/>	12. Driver's license date	<input type="text"/>
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13. Your e-mail address. If you provide your e-mail address, we will communicate with you electronically. For example, when your FAFSA has been processed, you will be notified by e-mail. Your e-mail address will also be shared with your state and the colleges listed on your FAFSA to allow them to communicate with you. If you do not have an e-mail address, leave this field blank.

<input type="text"/>	@	<input type="text"/>	.	<input type="text"/>
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