

July 1, 2015 - June 30, 2016

# FAFSA<sup>®</sup>

Federal Student Aid

PROUD SPONSOR of  
the AMERICAN DREAM<sup>™</sup>

FREE APPLICATION for FEDERAL STUDENT AID

**Step One (Student):** For questions 1-31, leave any questions that do not apply to you (the student) blank. OMB # 1845-0001

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"/> |
|--------------|----------------------|---------------|----------------------|-------------------|----------------------|

Your permanent mailing address

|  |                      |  |  |  |  |          |                      |             |                      |  |  |  |  |  |  |
|--|----------------------|--|--|--|--|----------|----------------------|-------------|----------------------|--|--|--|--|--|--|
| 4. Number and street (include apt. number) | <input type="text"/> |  |  |  |  |          |                      |             |                      |  |  |  |  |  |  |
| 5. City (and country if not U.S.)          | <input type="text"/> |  |  |  |  | 6. State | <input type="text"/> | 7. ZIP code | <input type="text"/> |  |  |  |  |  |  |

|  |                       |                      |                      |                      |                      |  |
|--|-----------------------|----------------------|----------------------|----------------------|----------------------|--|
| 8. Your Social Security Number See Notes page 2                    | 9. Your date of birth |                      | month                | day                  | year                 | 10. Your telephone number  |
| <input type="text"/> - <input type="text"/> - <input type="text"/> | <input type="text"/>  | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | ( <input type="text"/> ) <input type="text"/> - <input type="text"/> |

Your driver's license number and driver's license state (if you have one)

|                             |                      |                            |                      |
|-----------------------------|----------------------|----------------------------|----------------------|
| 11. Driver's license number | <input type="text"/> | 12. Driver's license state | <input type="text"/> |
|-----------------------------|----------------------|----------------------------|----------------------|

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"/> |
|----------------------|