



Mailing Address:
P.O. Box 183029
Columbus, OH 43218-3029
(614) 292-0300
(800) 678-6440

Student Name: _____ OSU ID# _____

PARENT SOCIAL SECURITY NUMBER CONFIRMATION FORM

The U.S. Dept. of Education requires parent date of birth and Social Security number to be reported on the student's FAFSA and conducts a "match" with other Federal agencies/programs, i.e., Social Security Administration, Dept. of Homeland Security (DHS), National Student Database, etc. One or more matching attempts has been reported as a "failed match". This occurred because one or both parents' name, date of birth or Social Security number reported on the FAFSA did not match their records.

Write in the correct information below. On your behalf, we will submit the correction to the U.S. Dept. of Education.

	Correct Information
Father's Name	
Father's Date of Birth	
Father's Social Security Number	

	Correct Information
Mother's Name	
Mother's Date of Birth	
Mother's Social Security Number	

YOU MUST submit a readable copy of each parent's **Social Security Card** and **Driver License or State ID** along with this form to our office.

Father's Signature (REQUIRED)

Date

Mother's Signature (REQUIRED)

Date