



**Social Security Verification Parent**

Parent Name: \_\_\_\_\_

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

We have been asked by the U.S. Department of Education to verify your name, date of birth, and Social Security number. Please complete, sign, and return this form along with the required attachments to the Financial Aid Office as soon as possible.

Date of Birth: \_\_\_\_\_

**Required Documentation for ALL Social Security verification:**

1. Please attach one of the following: A copy of your birth certificate, driver's license, state I.D. card, or passport to verify your date of birth.
2. A copy of your Social Security card to verify your name and Social Security number.
3. If the name you are currently using does not match the name on your Social Security card, please also attach a copy of the legal documentation of the name change (i.e. marriage certificate, divorce document, etc.). Note: You should also change your name with the Social Security Administration to avoid future difficulties.

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_

Please return form to:

Financial Aid Office  
Mount Vernon Nazarene University  
Attn: Vickie Williams  
800 Martinsburg Road  
Mount Vernon, OH 43050