

~~THIS DOCUMENT CANNOT BE FAXED OR MAILED~~

**A. Dependent Student's Information**

\_\_\_\_\_  
Student's Last Name          Student's First Name          Student's M.I.

\_\_\_\_\_  
Student's IRSQID Number

\_\_\_\_\_  
Student's Street Address (include apt. no.)

\_\_\_\_\_  
Student's Date of Birth

\_\_\_\_\_  
City                                  State                                  Zip Code

\_\_\_\_\_  
Student's Email Address

\_\_\_\_\_  
Student's Home Phone Number (include area code)

\_\_\_\_\_  
Student's Alternate or Cell Phone Number

**B. Dependent Student's Family Information**

List below the people on

Student's Name:





Student's Name: \_\_\_\_\_ IRSC ID: \_\_\_\_\_

**NOTARIZED STATEMENTS ONLY NECESSARY IF STUDENT CANNOT APPEAR IN PERSON**  
(copy of Driver License, U.S. Passport or other picture ID must accompany this form if signed by a notary)

**Notary's Certificate of Acknowledgement**

State of \_\_\_\_\_

City/County of \_\_\_\_\_

On (Date), \_\_\_\_\_,

before me, (Notary's name) \_\_\_\_\_,

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