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## 2018-2019 Student Demographic Form

This form is used to verify demographic information as a result of a mismatch from the information listed on the Free Application for Federal Student Aid (FAFSA). The mismatch information has to be resolved before financial aid can be awarded.

Student Last Name	First Name	Middle Initial	Redlands ID	
Street Address	City	State	Zip	Phone or Cell Phone Number

**PLEASE PRINT OR TYPE NEATLY THE NAME EXACTLY AS IT APPEARS ON THE SOCIAL SECURITY CARD.**

➤ **Student's Information**

Name: \_\_\_\_\_  
                                    First                                    MI                                    Last

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

➤ **Spouse's Information**

Name: \_\_\_\_\_  
                                    First                                    MI                                    Last

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

➤ **Student's Marital Status:** (circle one)      **IF STUDENT MARITAL STATUS IS DIVORCED or SEPARATED, PLEASE PROVIDE PROOF OF SEPARATION AND PROOF OF INCOME.**

Married/Remarried      Single      Divorced/Widowed      Separated

Month and year the marriage, divorce, separation or widow occurred: \_\_\_\_\_

➤ **Number in Household**

Number of people in the household that receive more than half of their support from the student listed on the FAFSA: \_\_\_\_\_

From the number listed above, how many will be at least a half time student **attending a post-secondary educational institution** in 2018-2019: \_\_\_\_\_

I (We) hereby affirm that all information reported on this form and any attachment hereto is true, complete, and accurate to the best of my (our) knowledge. I (We) understand that if I (we) receive federal student aid based on incorrect information, I (we) will need to repay it; I (we) may be required to pay fines and fees.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse's Signature \_\_\_\_\_ Date \_\_\_\_\_