

LAST NAME (STUDENT)	FIRST NAME	INT
SOCIAL SECURITY NUMBER	SVSU ID NUMBER	TELEPHONE NUMBER

Use this form to request copies of documentation you have submitted to the financial aid office.

1. Documentation Requested

Information that a student can request a copy of with proper identification: <i>Without the student present, the documentation will <u>only</u> be mailed to the student's address</i>	
<input type="checkbox"/> Student Tax Return: Year _____	<input type="checkbox"/> Request Copy (student present)
<input type="checkbox"/> Student W-2 Form: Year _____	<input type="checkbox"/> Request Mailed Copy (student not present)
<input type="checkbox"/> Other:	
<input type="checkbox"/> Other:	
Information that a parent can request a copy of with proper identification: <i>Without the parent present, the documentation will <u>only</u> be mailed to the parent's address</i>	
<input type="checkbox"/> Parent Tax Return: Year _____	<input type="checkbox"/> Request Copy (parent present)
<input type="checkbox"/> Parent W-2 Form: Year _____	<input type="checkbox"/> Request Mailed Copy (parent not present)
<input type="checkbox"/> Other:	
<input type="checkbox"/> Other:	

2. Requester Information

Person requesting the information listed above:	
<input type="checkbox"/> Student	<input type="checkbox"/> Parent (print name): _____

Note: If you are mailing or faxing the form in, the information will *only* be mailed to the person whose name appears on the documentation.

You must also mail or fax in a copy of the student's and/or parent's driver's license for any requests not made in person.

Signature

Date

-Office Use Only-

- | | |
|--|--|
| <input type="checkbox"/> Copy Made of Student Driver's License (attach) | <input type="checkbox"/> Copy Made of Parent Driver's License (attach) |
| <input type="checkbox"/> Copy Given to Student/Parent _____ (initials/date) | |
| <input type="checkbox"/> Copy Mailed to Student/Parent _____ (initials/date) | |