

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

<b>Information that a student can request a copy of with proper identification:</b> <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:	
<b>Information that a parent can request a copy of with proper identification:</b> <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

<b>Person requesting the information listed above:</b>	
<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

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### -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) |  |