

Financial Aid

450 North Avenue • Battle Creek, MI 49017-3397
269-965-4123 • FAX 269-966-4089
www.kellogg.edu/financial-aid

Student Name (please print legibly) _____ Student ID# _____

The Student is required to submit the information requested below for at least one of the parents/step-parents the student identified on the Free Application for Federal Student Aid (FAFSA) for the school year 2019-2020. This should be the parent/step-parent that the student currently resides with, or most recently resided with.

The information requested on this form is required for the continued processing of the student's application for Federal Student Aid. Failure to provide this information will cause the student application to NOT be processed. You may make these changes to your FAFSA application and notify our office.

At a minimum, information and signature of at least one parent/step-parent is required.

The following information for your parent(s) is required to complete your financial aid application. Please complete all applicable sections below with current information and return to KCC Financial Aid.

FATHER/STEPFATHER INFORMATION

Father/Stepfather Full Name _____

Father/Stepfather Address _____

Father/Stepfather City, State, Zip _____

Father/Stepfather Date of Birth _____

Marital Status and Date _____

Father/Stepfather Social Security # (enter all zero's if None) _____

Father/Stepfather Signature _____ **Date** _____

MOTHER/STEPMOTHER INFORMATION

Mother/Stepmother Full Name _____

Mother/Stepmother Address _____

Mother/Stepmother City, State, Zip _____

Mother/Stepmother Date of Birth _____

Marital Status and Date _____

Father/Stepfather Social Security # (enter all zero's if None) _____

Mother/Stepmother Signature _____ **Date** _____