



Student Financial Services
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2019-2020 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 2019-2020: _____

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 _____