

An OFFICE of the U.S. DEPARTMENT of EDUCATION

OMB No. 1845-0001

Student 

Questions 1–24 apply to the **student**. Leave blank any questions that don't apply to the student.

– [See Notes page 21.]

*The student's full legal name, for example, as it appears on their Social Security card.*

First name

[illegible]

Middle name

[illegible]

Last name

[illegible]

**Suffix (e.g., Jr. or III)**

[illegible]

Date of birth

--	--	--	--

MM / DD / YYYY

Social Security number (SSN)

--	--	--

--	--

--	--	--	--

Individual Taxpayer Identification Number (ITIN)









-







-

















Enter the student's ITIN if they don't have an SSN.

 Student