Student Financial **Aid**

A Department of Central Piedmont Community College

Verification of Social Security Benefits (SSB)

Name: _____ **Student ID Number:** _____

Instructions to Student: Your financial aid application has been selected for verification. Please write the name and social security number of each person indicated on your Free Application for Federal Student Aid (FAFSA), including yourself. You may attach copies of each person's previous year SSA-1099 to verify the amount received.

Also, you must complete this form and have the monthly information verified by the Social Security Administration **before** it is submitted to the Financial Aid/VA Office

Name	SS#	Relationship	Monthly Amount	Months Paid
Example: John Doe	*123-45-6788*	*Father*	*$304*	*08/12-12/12*
1)				
2)				
3)				
4)				
5)				
6)				
7)				
8)				

Student's Signature: _____ Date: _____/_____/_____

Parent's Signature: _____ Date: _____/_____/_____

[*Required if dependent*]

The "Monthly Amount" and the "Months Paid" from the above chart must be verified and/or completed by the student, parent *(if student is dependent)* and/or the Social Security Administration. If verified by the Social Security Administration, please have the representative sign this form.

_____ _____ _____

Signature of Authorized Social Security Administration Official ***Title*** ***Date***

_____ _____

Address of District Office ***Telephone Number***

Warning: According to the U.S. Department of Education, if you purposely give false or misleading information on form, you may be subject to a fine of up to $20,000 or imprisonment for up to 5 years, or both.

Financial Aid/Veteran's Affairs – Central Piedmont Community College – PO Box 35009 – Charlotte, NC 28235-5009
Telephone: (704) 330-6942 Fax: (704) 330-5053

You may submit, fax or mail your documents to any of our six locations.

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