

Name		
Empl ID		
Student	Phone	

2019/2020 SPECIAL CIRCUMSTANCE PARENTAL COLLEGE ENROLLMENT VERIFICATION (FASPPC)

Approved Special Circumstances do not guarantee any additional aid will be awarded. Excluding peak periods, the estimated timeframe for a review is 6 to 8 weeks.

Please complete the following information about parent enrollment in college courses during the 2019-2020 academic year. Parent must be enrolled for a minimum of 6 hours (July 1, 2019 – June 30, 2020) per semester or equivalent clock hours per term to validate this request.

- * If parent is attending <u>Florida State University</u> please indicate below and the Office of Financial Aid will verify enrollment.
- * If parent is attending another Institution please provide either a college enrollment verification form/worksheet from the Registrar's Office, or class schedule and receipt of payment, and attach it to this application.

Parent Name	First	Middle Initial	
Lusi	rtrst	Middle Initial	
Name of Institution Attending			
ion II. – To Be Completed by R	Registrar's Office of	Parent's School	
Please certify that the student (parenteelow:	nt named above in section	n one) is enrolled by completing	
j	s enrolled at		
Student's Name			
at least half-time (6 credit hours), as	defined by the institution	n, in a program leading to a col	
degree, or certificate. The projected	graduation date is		
School Officials Name		Date	
School Officials Signature	Con	tact #/Ext.	
School Officials Signature certify that the information liste			

Florida State University's Use of Social Security Number policy is available at https://registrar.fsu.edu/bulletin/undergraduate/information/university_notices/
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