



DATE OF BIRTH VERIFICATION

PERSONAL INFORMATION

AID YEAR: 24/25

Social Security Number: _____ Birthdate: (MM/DD/YYYY) _____ / _____ / _____

Legal Name: Last _____ First _____ Middle _____

Any other names under which you attended school _____

FAFSA RECORD NOT MATCHED TO BIRTH DATE ON RECORD

Loma Linda University must confirm your date of birth. The birth date you submitted on your FAFSA does not match with Loma Linda University's student record for you. Submit either a correction to your FAFSA if you incorrectly entered your birth date, or provide the original, certified, or Notarized copy of the following document to the Office of Financial Aid.

PLEASE NOTE: If the date of birth on your legal document (s), differs from what Loma Linda University Office of University Records has in its database, or from what you submitted on your FAFSA, please submit an explanation of the discrepancy.

The Office of University Records will only update your date of birth with the submission of an original, certified, or notarized copy of the original document (Birth Certificate, Passport, etc.).

- The birth date submitted on the FAFSA is incorrect, a correction has been made, and a copy of my legal document is submitted with this form.
- The birth date submitted on the FAFSA is correct. Please have the Office of University Records correct my birth date on my student record. I am including the original, certified copy, or notarized copy of my Birth Certificate, or Passport with this form to substantiate this change.

*****Please do not mail original requested documents. Bring in person only.
If unable to bring in person, consider sending an notarized copy of the document(s).**

REQUIRED SIGNATURES

By signing below, I authorize Loma Linda University to make the necessary name corrections to my records with my Loan Servicer, Office of University Records, Student Aid Report (SAR), and the Student Loan Accounts Office for Perkins loan information. I understand that the name recorded on the attached Social Security card will be considered my legal name and this name will be used on all databases that report enrollment or financial information to the National Student Loan Data System (NSLDS).

I certify that all the information reported on this form and submitted is true and accurate to the best of my knowledge. I understand that this information will be used to determine my eligibility for financial aid and that false or misleading information may be cause for termination of aid and repayment of funds received.

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

FOR FINANCIAL AID OFFICE USE ONLY

Original Verified by: _____ Copy of: _____ made and attached.

RETURN FORM TO:

LLU Office of Financial Aid | 11139 Anderson St. | Loma Linda, CA 92350

WARNING: If you purposely give false or misleading information, you may be fined, be sentenced to jail, or both.

If you have any questions please email Finaid@llu.edu or call (909) 558-4509