

**2022-2023
ADD PARENT TO FAFSA FORM**

Questions about how to complete this form?

Call 217-786-2237 or 800-727-4161.

www.llcc.edu/financial-aid

Return completed form to:

 LLCC Financial Aid
5250 Shepherd Road
Springfield, IL 62794-9256

financial.aid@llcc.edu
Electronic forms only accepted from LLCC email addresses.

217-786-2229 fax

Student Information

STUDENT NAME (LAST, FIRST, MIDDLE INITIAL)	SSN OR STUDENT ID	DATE OF BIRTH
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Parent Demographic Information

PARENT 1 NAME	PARENT 1 SSN	PARENT 1 DATE OF BIRTH
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PARENT 2 (IF APPLICABLE) NAME	PARENT 2 SSN	PARENT 2 DATE OF BIRTH
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PARENT(S) STATE OF LEGAL RESIDENCY

RESIDENT OF ILLINOIS BEFORE 1/1/2017? YES NO	IF NO, DATE AND MONTH OF ILLINOIS RESIDENCY
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Parent Assets (Please put an amount even if it is zero.)

 As of today, what is your parents' total current balance of cash, savings and checking accounts? **Do not include** student financial aid: _____

 As of today, what is the net worth of your parents' investments, including real estate? **Do not include** the home in which your parents live: _____

 As of today, what is the net worth of your parents' current businesses and/or investment farms? **Do not include** a family farm or family business with 100 or fewer full-time or full-time equivalent employees: _____

Additional Forms/Documents Needed (www.llcc.edu/financial-aid)

- Parents' signed 2020 Federal Tax Return and 2020 W-2s, or 2020 IRS Tax Transcript and 2020 W-2s
 - If parents did not file:
 - LLCC Parent Non-Tax Filing Status Verification Form
 - 2020 IRS Non-Filing Letter
- LLCC 22-23 Parent Household Size Verification Form
- LLCC 22-23 Parent Marital Status Form
- LLCC 22-23 FAFSA Signature Form

Certification and Signature

By signing this form, you certify that all the information reported to qualify for federal student aid is complete and correct.

WARNING: If you purposely give false or misleading information on this form, you may be fined and/or sentenced to jail.

STUDENT SIGNATURE (REQUIRED – Sign printed form.)	DATE
PARENT SIGNATURE (REQUIRED – Sign printed form.)	DATE