Date Received



Dependent Notification Form

Date Scanned

You indicated on your Application for Admission that you will be bringing dependents with you while you are a studying at Fairmont State University. Please list all dependents and return this form along with a copy of each dependent's passport and birth certificate or marriage certificate to admissions@fairmontstate.edu or fax 304-367-4789 or mail to Fairmont State University; 1201 Locust Avenue; Enrollment Services; Fairmont, WV 26555.

Student Information:					
Student ID _		Birthdate			
Student Nai	me:				
Surname/Primary Name				Middle	
Email		Term			
child must b	as it appears on their passport) be younger than 21 years of ag	e) that you will be b			
Dependent_	Surname/Last Name		Middle	Relationship	
Dependent_					
	Surname/Last Name	Given Name	Middle	Relationship	
Dependent					
•	Surname/Last Name	Given Name	Middle	Relationship	
Dependent_					
	Surname/Last Name	Given Name	Middle	Relationship	
Signature _			Date		