



KEEP THIS FORM IN A SAFE PLACE FOR FUTURE USE. NEVER SHARE YOUR FSA ID.

Guide Sheet for Creating an FSA ID

Website Address: <https://fsaid.ed.gov/npas/index.htm>

Student Information: The following information must be entered correctly on your FSA ID to prevent delays.

Email Address: _____ Username: _____ Password: _____
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Date of Birth: ___/___/_____ Social Security #: _____ - _____ - _____
 Mailing Address: _____ City _____ State ___ Zip code _____

Would you like to register your mobile phone number to reset your password and retrieve your username?

<input type="checkbox"/> Yes, I would like to register my mobile phone for account recovery. <i>By selecting this option, you agree to receive text messages on your mobile phone and confirm you have reviewed and agree to the terms.</i>	<input type="checkbox"/> No, I do not want to register my mobile phone for account recovery. <i>Note: You can register at any time by managing your FSA ID.</i>
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Mobile Phone Number (____) _____ Alternate Phone Number (____) _____

Challenge Questions:

Question #1: _____
 Answer #1: _____

Question #2: _____
 Answer #2: _____

Question #3: _____
 Answer #3: _____

Question #4: _____
 Answer #4: _____

Question #5: Would you like to provide an 8-digit code to use to access your loan balances over the phone?
 Yes 8-digit code: _____
 No