

Financial Aid System of TN (FAST) HIGH SCHOOL USER REQUEST

No handwritten forms will	be accepted, the forms mu	ıst be completed and signed	electronically.
Name (First, MI, Last)		Email Address	
Six Digit High School Code	High School Name		
Address		City	
ST		ZIP	County
High School Phone Number		High School FAX Number	
school academic requirement Principal Signature		red by the school system and in arship programs. Date	s authorizea to verijy nigh
Principal Name		Email Address	
	TSAC USE ONLY	BELOW THIS LINE	
Licornamo Assigned			
Username Assigned			
TSAC Authorization Signature		Date	

While using any major browser besides Internet Explorer, click the following link to access the **FAST Login** page: https://fast.tn.gov

By gaining access to this site, you certify that you are an employee of the school to which this username has been issued. You further agree to the terms and conditions of the License Agreement. Access without permission may subject you to civil penalties or criminal prosecution.

Email this request to Jo Wallace at jo.wallace@tn.gov or FAX to 615.741.6101

STATE OF TENNESSEE

TENNESSEE STUDENT ASSISTANCE CORPORATION

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