

## Community Colleges 2019–2020 Dependent Household Size Verification Form

Your financial aid application was selected by the U.S. Department of Education to undergo a process called verification. You and your parent must complete, sign, and submit this form listing the name and age of each of your parent(s)' household members and their relationship to you. The form must be submitted to the Financial Aid Office to continue the review process and determine your eligibility for federal student aid.

A. Student Information				
Student's Name (Last, First, M.I.)			Student ID – REQUIRED	
Student's Phone Number:				
B. Household Information List the people in your parent(s)' house	shold. Include the following:			
<ul> <li>Your parent(s)' other childrer other children would be required include children who meet eight of their people if they now live more than half of their supposition.</li> <li>If more space is needed attach an add</li> </ul>	ired to provide parental information ther of these descriptions, even if the with your parent(s) and your parent through June 30, 2020.	than half of their s if they were comp ney do not live with t(s) provide more	than half of their support and will cont	id application.
additional sheet.  First Name	Last Name	Age	Relationship to You	
EXAMPLE: Missy	Jones	18	Sister Self	
C. Certification and Signature Each person signing below certifies the attached. The student and one parent WARNING: If you purposely give fall	at all the information reported on this MUST sign and date this section.			
Student's Signature			Date	
Parent Signature			 Date	

\*Please submit this form by uploading it to your Student Services Center To-Do List. Visit our website for instructions on how to access your Student Services Center.