2020-2021 Household Information Verification Worksheet **V1B-Dependent Student**

Your 2020–2021 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you and your parents reported on your FAFSA. To verify that you provided correct information, the financial aid administrator at your school will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and at least one parent must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your school may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

Student's Last Name	Student's First Name		Student's M.I.	Student's S	Student's Social Security Number	
Student's Street Address (include apt. no.)				Student's D	Student's Date of Birth	
City	State		Zip Code	Student's Email Address		
Student's Home Phone Nu	mber (include are	ea code)		Student's A	Alternate or Cell Phone Number	
ımber of Household Membe	ers and Number	in College				
Include children who med Other people if they now continue to provide more timber in College: Please includes	et either of these live with the pare than half of their ude in the space ertificate program	standards events and the proport throubelow information at an eligible	en if the children do n arents provide more ugh June 30, 2021. ution about any house	ot live with the pare han half of the othe hold member who	pleting a FAFSA for 2020-202 ents. er people's support and will is, or will be, enrolled <u>at least</u> any time between July 1, 202	
nore space is needed, provid		J	dent's name and ID r	umber at the top.		
Full Name	Age	Relationship	O Co	ollege	Will be Enrolled at Least Half Time (Yes or No)	
		Self				
ote: We may require additiona				e information rega	rding the household members	
noch norcen signing below certifies that all of the information reported				WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.		
nt Student's Name			Student's ID Numbe	-		
				_		
ident's Signature (Required)			Date			

Date

Parent's Signature (Required)