

Financial Aid Office

2023 - 2024 Dependent Student Household Size/Number in College Form

Your application has been selected for review in a process called **verification.** In this process, we will compare the information from your FAFSA application with the information provided on this form, and with any other required documents. By law, we have the right to ask you for this information before awarding federal aid. If there are differences between your FAFSA application and the documents you provide, we will submit corrections to the federal processor. Return your verification documents as soon as possible, in order for your file to be ready to review for eligible awards.

STUDENT INFORMATION:

Last Name	First Name	Soc	ial Security # (Last 4 Digits)	SCC 7 Digit Student ID #
Phone # (Include Area Code)		Email Ad	dress	
		HOUSEHO	LD INFORMATION	
Dependent student, include:				
 Your parent(s)' other chi a) your parent(s) will pro b) the children would be 	Idren if: vide more than ha required to provid y now live in your p), 2024	alf of their support de parental inform parents' househol		June 30, 2024, or
Full Name	Age	Relationship	Name of College and Degree Program (If enrolled during 2023-2024 year and at least half-time student)	
		Self	SCC/	
TIFICATION: Please sign he			onal page if necessary Waming: If you purposely give fals	e or misleading information, you may be fined, be sentence
both.	·			
nt Signature				Date
t Signature (If a student is dependent, whose information was			arent Name (Please Print)	Date
	•		helieve that any information s	upplied on this document may not be accurate, we

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require additional documentation. You will receive another email when your eligibility is determined.