



2017-2018

INDEPENDENT - HOUSEHOLD SIZE and NUMBER in COLLEGE

Your 2017-2018 application has been selected for review in a process called "VERIFICATION." The law says that before awarding you Federal Student Aid, we may ask you and your parents to confirm the information you reported on your FAFSA. 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 office. If you have questions about verification, contact your financial aid office as soon as possible so that your financial aid will not be delayed.

Please Complete In Blue/Black Ink.

| | | | |
|----------------------------|------------|----------------|----------------------------------|
| Last Name | First Name | Middle Initial | PID |
| Address (include apt. no.) | | | Date of Birth |
| City | State | Zip Code | Phone Number (include area code) |

List the people in your household. Include:

- ◆ Yourself, and your spouse if you have one
- ◆ Your children, if you will provide more than half of their support from July 1, 2017, through June 30, 2018, even if they do not live with you
- ◆ Include all other people **ONLY** if they now live with you, and you provide more than half of their support **AND** will continue to provide more than half of their support from July 1, 2017 through June 30, 2018.
- ◆ Include the name of the college for any household member who will be attending college at least half-time between July 1, 2017 and June 30, 2018, and will be enrolled in a degree, diploma, or certificate program.

| First | Full Name Last | Age | Relationship to you (self, parent, brother, sister, etc) | If this person will attend college half-time or more in 2017-2018, print the name of the college. | Will be Enrolled at least 6 credit hours? Yes or No |
|-------|-------------------|-----|--|---|---|
| | | | Self | Colorado State University-Pueblo | |
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If there are more than six people in your household, please attach a separate piece of paper with the above information for each additional person.

CERTIFICATIONS AND SIGNATURES

Each person signing below certifies that all of the information reported above is complete and correct. The student and spouse whose information was reported on the FAFSA must sign and date.

WARNING: If you purposely give false or misleading information you may be fined, sentenced to jail, or both.

Student Signature: _____

Date: _____

Spouse Signature: _____

Date: _____