



Student's Name: \_\_\_\_\_

Student's ID#: \_\_\_\_\_

**C. Independent Student Family Information**

List all the people in your household who will be supported by you between July 1, 2020 and June 30, 2021.

Be sure to include:

- **Yourself**, even if you don't live with your parent(s)
- **Your spouse**, if you are married
- **Your children**, if any, if you will provide more than half of their support from 7/1/2020 through 6/30/2021.
- **Other children or other people**, if they now live with you and you will provide more than half of their support and will continue to provide more than half of their support from 7/1/2020 through 6/30/2021.

**DO NOT INCLUDE CHILDREN FOR WHOM A LISTED PARENT PAYS CHILD SUPPORT.**

**DO NOT INCLUDE FOSTER CHILDREN**

Include the name of the college for any household member, who will be enrolled at least half time in a degree, diploma, or certificate program at a postsecondary educational institution any time between 7/1/2020, and 6/30/2021.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
<i>Missy Jones (example)</i>	<i>18</i>	<i>Sister</i>	<i>Central University</i>	<i>Yes</i>
		<b>Self</b>	<b>Heritage University</b>	

**If we have reason to believe any information on this worksheet is inaccurate, we may require additional documentation.**

**D. Certification and Signature:**

Each Person signing this worksheet below certifies that all of the information reported on it is complete and correct.

\_\_\_\_\_  
Student's Signature (Required) Date

**FOR DEPENDENT STUDENTS ONLY:**

\_\_\_\_\_  
Parent's Signature Date

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

Return signed and completed form(s) or other documents to your local campus.