2009-2010 Household Verification
Dependent

The U.S. Department of Education has questioned some of the information from your Free Application for Federal Student Aid. The information on this form will be compared to the information found on your Individual Student Information Report (ISIR) which has been received by the college. If any items are found to be incorrect, they will be corrected and the Financial Aid Office will transmit the corrected information to the U.S. Department of Education so your file can be reprocessed. The law says we have the right to ask you for this information before awarding Federal aid so please do not delay completing this form and returning it to the Financial Aid Office.

A. Student Information

_____

Last name First name M.I.

_____ **XXX-XX-**_____

Student ID Number Last 4 Digits of Social Security Number

B. Parent's Marital Status

Student's parents/stepparents are: ___ Single ___ Married ___ Separated ___ Divorced ____ Widowed

C. Household/Family Information

List the people in your parent(s)' household, include:

- yourself and your parent(s) (including step parent) even if you don't live with your parents, and
- your parents' other children, even if they don't live with your parents, **if (a) your parents will provide more than half of their support from July 1, 2009 through June 30, 2010**, or (b) the children would be required to provide parental information when applying for Federal Student Aid, and
- other people if they now live with your parents, and your parents provide more than half of their support and **will continue to provide more than half of their support from July 1, 2009 through June 30, 2010**.

Write the names of all household members in the space(s) below. Also write in the name of the college for any household member, excluding your parent(s), who will be attending college at least half-time between July 1, 2009 through June 30, 2010, and will be enrolled in a degree, diploma, or certificate program. If you need more space, attach a separate page.

	Full Name	Age	Relationship	College
1			Self (student)	Isothermal Community College
2				
3				
4				
5				
6				
7				
8				
9				
10				

By signing this worksheet, we certify that all the information reported on it is complete and correct. At least one parent must sign. **WARNING: If you purposely give false or misleading information on the worksheet, you may be fined, be sentenced to jail, or both.**

_____ _____

Student's Signature Date Signed

_____ _____

Parent's Signature Date Signed