

## 2025-26 Household Verification - Independent

Federal Student Aid Programs

A. Student Information						
Last Name		First Name	M.I.		Student ID#	
Address (include Apt. #)					Date of Birth	
City		State	ZIP Code	<u> </u>	Phone Number (include area code)	
В.	Family Information					
1.						
	Single	Married or Rema	arried* [	Sepa	rated	
	Divorced	Widowed				
	*If you are married as of date you filed the FAFSA, you must include your spouse's information.					
2. List the people in your household, including:						
	<ul> <li>Your dependent children, if you will provide more than half of their support during the award y if they do not live with you. Do not list unborn children.</li> <li>Other persons if they now live with you and you provide more than half of their support and wil to provide more than half of their support during the award year. Please note the financial aid or require proof of the data below, including, but not limited to non-filer forms from the IRS documentation of no/low income.</li> </ul>					
	Write the names of all household members in the space(s) below:  Full Name  Age			Dolationship to Chudout		
		ruii Name		Age	Relationship to Student  Self / Student	
					Sell / Stadelit	
C. Sign this Worksheet						
	By signing below, I certify that all the information reported is complete and correct.					
	Student Signature (Rec	quired)	Date	<u> </u>		
	Spouse Signature		Date			