



2014-2015

Dependent Verification of Number in Household

Student Financial Services – RME118
 1825 N Bluemound Dr/ PO BOX 2277
 Appleton WI 54912
 Ph: (920) 735-5650 * Fax (920) 735-5763

 Student's Name (Please print)

 Student ID Number

The U.S. Department of Education has identified conflicting information regarding the number of individuals in your parent(s)' household. Please complete the information below as instructed.

Family Information

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

1. Yourself (even if you do not live with your parents).
2. Your parents (includes stepparent if remarried).
3. Your parents' other children (only if your parents provide more than half of their support from July 1, 2014 through June 30, 2015, or they would be required to give parental information when applying for 2014-2015 federal aid).
4. Other people if they now live with your parents and the parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2014 through June 30, 2015.

Note: You may be required to submit documentation proving that you provide more than half of the support for those listed.

Full Name	Age	Relationship
		Self

If you need additional space, attach a separate page.

By signing this worksheet, I certify that all the information reported is complete and correct.

 Student's Signature

 Date

 Parent's Signature

 Date

Office use only: Date received _____ Staff Initials _____