

Number of Household Members and Number in College

Student Name: _____ **W#** _____ **Birthdate:** _____

INDEPENDENT Student’s Household Members:
 List below the people in the student’s household. Include:

- * The student.
- * The student’s partner, if the student is married.
- * The student’s or partner’s children if the student or spouse will provide more than half of the children’s support from July 1, 2024 through June 30, 2025, even if a child does not live with the student.
- * Other people if they now live with the student and the student or partner provides more than half of the other person’s support, and will continue to provide more than half of that person’s support through June 30, 2025.

DEPENDENT Student’s Household Members:
 List below the people in the parents’ household. Include:

- * The student.
- * The parents (including a step-parent) even if the student doesn’t live with the parents.
- * The parents’ other children, if the parents will provide more than half of the children’s support from July 1, 2024, through June 30, 2025, or if the other children would be required to provide parental information if they were completing a FAFSA for 2024-2025. Include children who meet either of these standards, even if a child does not live with the parents.
- * Other people if they now live with the parents and the parents provide more than half of the other person’s support, and will continue to provide more than half of that person’s support through June 30, 2025.

Number in College: Include in the space below information about any household member who is, or will be, enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2024 and June 30, 2025. Please include the name of the college.

Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

Full Name	Age	Relationship to Student	College	Will be Enrolled at Least Half Time? (Yes or No)	Supported 50%

Each person signing below certifies that all of the information reported is complete and correct. **WARNING: If you purposefully give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**

For dependent students, the student and parent whose information was reported on the FAFSA must sign and date.

Student Signature _____ **Date** _____

Partner/Parent Signature _____ **Date** _____