

2024 -2025 Student Household Verification Worksheet

Student's Name:			Student ID:		
he C	Office of Financial Aid is required to confirm	m the inform	nation you reported o	on the FAFSA.	
nstr	uctions:				
rint t	the names of the people in your household ling.	in the space	(s) below. Include the	ne name of the colleg	e they are currently
<u>A</u>]	household includes:				
•Y	ou				
•Y	our spouse, if married				
✓	our children, if You provide more than half of their sup OR Children would be required to provide p Other people who live with you, if You will provide more than half of their	parental infor	rmation when applyi	ng for Federal Studen	ıt Aid
	Full Name	Age	Relationship	College	Enrolled at Least Half- Time
	Missy Jones (example)	14	Sibling	None	No
1			Self	SUNY Erie	
2					
3 4					
1 5					
6					
7					
8					
9					
10	10 1		please attach a separ	,	
y sig	fication: ning below, I acknowledge and confirm the iding information may result in federal fine			mplete and correct. F	Purposely giving false c
tude	ent Signature:			_ Date:	-