



HOUSEHOLD SIZE
DEPENDENT VERIFICATION FORM
2021-2022

Financial Aid Office
1000 Rim Drive
Durango, CO 81301-3999
Phone: 970-247-7142
Toll Free: 1-800-352-7512
Fax: 970-247-7108
Email: finaid_off@fortlewis.edu

Your Free Application for Federal Student Aid (FAFSA) was selected for a process called verification. The law states that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this verification form. If there are differences, your FAFSA information will be corrected electronically. We may ask for additional information. If you have questions about verification, please contact us.

STUDENT NAME _____ STUDENT ID _____

STUDENT CELLPHONE NUMBER () _____

List below the people in the parents' household who meet the following criteria. Include:

- The parents, even if you do not live with the parents. Read the following guidelines for additional clarification:
- List below both legal parents if they are married.
- If your legal parent you included in your FAFSA is remarried, also list your stepparent.
- If your legal parents were never married, or they are separated and do not live together, list the legal parent you included in your FAFSA.
- List both your legal parents (biological and/or adoptive) if they are not married to each other, but live together, regardless of their gender. Do not include any person who is not married to your parent and who is not a legal or biological parent.
- If your widowed parent is remarried as of today, list that parent and your stepparent.
- List your parents' other children if: (a) your parents will provide more than half of their support from July 1, 2021 through June 30, 2022, or (b) they would be required to provide parental information when applying for federal student aid.
- List other people only if they now live with parent(s) listed, and your parent(s) provide more than half of their support, and will continue to provide more than half of their support from July 1, 2021 through June 30, 2022.
- Include, in the designated space, the name of the college of 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, 2021 and June 30, 2022.

Table with 5 columns: Full Name, Date of Birth, Relationship to student, Name of College/University (attending between July 1, 2021 and June 30, 2022), Will be enrolled at least half time? (YES/NO)

If you need more space, continue the list on the back of this page.

Each person signing this form certifies that all the information reported on it is complete and correct. The student and at least one parent must sign and date. If you purposely give false or misleading information on this form, you may be fined, sent to prison, or both. Electronic/typed signatures are not acceptable.

Student Signature _____ Date _____

Parent Signature _____ Date _____

All documentation requested must be received and reviewed before your financial aid can be finalized and disbursed. If you have questions or need assistance, please contact the Financial Aid Office.