

## HOUSEHOLD SIZE DEPENDENT VERIFICATION FORM 2022-2023

**Financial Aid Office** 

1000 Rim Drive Durango, CO 81301-3999 Phone: 970-247-7142 Toll Free: 1-800-352-7512

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Email: <u>finaid\_off@fortlewis.edu</u> Upload: <u>fortlewis.edu/faupload</u>

Your Free Application for Federal Student Aid (FAFSA) was selected for a process called verification. The law states that before awardii
Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided corre
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' h	ousehold 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 <u>more than half of their support</u> from July 1, 2022 through June 30, 2023, 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, 2022 through June 30, 2023.
- 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, 2022 and June 30, 2023.

Full Name	Date of Birth	Relationship to student	Name of <u>College/University</u> (attending between July 1, 2022 and June 30, 2023)	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.