



Swainsboro
 346 Kite Rd
 Swainsboro, Georgia 30401
 Phone: (478) 289-2200
 Fax: (478) 289-2263

Vidalia
 3001 East First Street
 Vidalia, Georgia 30474
 Phone: (912) 538-3100
 Fax: (912) 538-3156

2017-2018 Dependent Student Household Size Verification Form

Your 2017-2018 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says 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 institutional verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and a parent whose information was reported on the FAFSA must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to us. We may ask for additional information.

A. Dependent Student's Information

Student's Last Name	First Name	M.I.	Student's Identification (ID) Number
Student's Street Address (include apt. no.)			Student's Date of Birth
City	State	Zip Code	Student's Email Address
Student's Home Phone Number (include area code)		Student's Cell Phone Number	

B. Parent's Household Size Information

List below the people in the parents' household. Include:

- The student.
- The parents (including a stepparent) even if the student doesn't live with the parents.
- The parents' other children if the parents will provide more than half of their support from July 1, 2017, through June 30, 2018, or if the other children would be required to provide parental information if they were completing a FAFSA for 2017-2018. Include children who meet either of these standards even if the children do not live with the parents.
- Other people if they now live with the parents and the parents provide more than half of their support and will continue to provide more than half of their support through June 30, 2018.

For any household member, **excluding the parents**, who 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, 2017, and June 30, 2018, include the name of the college. If more space is needed, provide a separate page with the student's name and ID number at the top.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time (Yes or No)
		<i>Self</i>	Southeastern Technical 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.

C. Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was used on the FAFSA must sign and date.

WARNING: If you purposely give false or misleading information you may be fined, be sentenced to prison, or both.

 Print Student's Name

 Student's ID Number

 Student's Signature

 Date

 Print Parent's Name

 Parent's Signature

 Date