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*Southeastern Technical College is an Equal Opportunity Institution*

## 2019-2020 Dependent Student Household Size Verification Form

Your 2019-2020 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 (include area code)	

### B. Parent's Household Size Information

Number of Household Members: 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 the children's support from July 1, 2019, through June 30, 2020, or if the other children would be required to provide parental information if they were completing a FAFSA for 2019-2020. 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, 2020

Student's Name \_\_\_\_\_

Student's ID Number \_\_\_\_\_

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, 2019, and June 30, 2020, and 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)
_____	_____	Self	Southeastern Tech	Yes
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

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