

2024-2025 Dependent Verification Worksheet

_ast Name	First Name	M.I.		Student ID#
Address (include apt	. #)			Date of Birth
City	State	Zip Code		Phone Number (include area code)
Other pe 2024 thro f your biological properties are f your parents are	ough June 30, 2025. parents live together, even if e divorced or separated, you	ur parents, and your pa they are not currently ir FAFSA parent is the	married, you m parent that you	de more than half of their support from July 1, ust include information about both parents. Ilived with most during the 12 months prior to ust include stepparent information.
	Full Name	•	Age	Relationship
				Self
				nd correct. The student and one parent signatures are not accepted.

Federal law restricts the way in which documents are submitted to the Financial Aid Office. Verification forms must be submitted by fax, postal mail or in person. Documents attached to an email are not accepted to protect the privacy of student information.