



2019-2020 Dependent Household Worksheet

Student Name _____

Student ID # _____

Address (include apt no.) _____

Date of Birth _____

City _____ State _____ Zip Code _____

Phone number (include area code) _____

Your application was selected by the U.S. Department of Education and/or Garden City Community College for review in a process called "verification". In this process, we are required by federal law (34 CFR, Part 668) to compare the information from your application with the information provided on this form. Complete this verification form and submit it to the financial aid office as soon as possible, so that your financial aid won't be delayed.

FAMILY SIZE INFORMATION:

List all people your parents support now and through June 30, 2020. **INCLUDE:**

- Yourself
- Your Parent(s)/Step-Parent
- Your Parent(s) Children—even if they don't live with your parent(s), if (a) your parents will provide **more than half** of their support from July 1, 2019, through June 30, 2020, or (b) the children would be required to provide parental information when applying for Federal Student Aid
- Others in your parent(s) household—if they now live with your parents, they receive **more than half** of their support* from your parents and will continue to do so from July 1, 2019, through June 30, 2020.

*support includes money, gifts, loans, housing, food, clothes, medical/dental care, etc.

Write the names, ages, and your relationship to all household members. Also, write in the name of the college for any family member, excluding your parent(s), who will be attending college **at least half time** between July 1, 2019 and June 30, 2020, and will be enrolled in a degree, diploma, or certificate program. Please attach a separate sheet if you need more space.

Full Name	Age	Relationship	College Attending in 2019-2020
		Self	Garden City Community College

SIGN THIS WORKSHEET

Warning: If you purposely give false or misleading information on this form to help establish eligibility for Federal Student Aid, you may be subject to a **\$20,000 fine, a prison sentence or both.**

Student Signature _____

Date _____

Parent Signature (one parent whose information was provided on FAFSA) _____

Date _____