



HOUSEHOLD VERIFICATION (DEPENDENT)

STUDENT INFORMATION

AID YEAR: 24/25

LLU ID# or Social Security Number: _____ Birthdate: (MM/DD/YYYY) _____ / _____ / _____

Name: Last _____ First _____ Middle _____

Permanent Mailing Address: Street Address _____

City _____ State _____ Zip _____ Country _____

Phone _____

STUDENT VERIFICATION WORKSHEET FAMILY INFORMATION

IMPORTANT – READ CAREFULLY: The information reported on your FAFSA application reflects a household size that is different than the household size reported on the Parent Verification Worksheet that you completed recently. Use this worksheet to *clarify* and *confirm* your parent(s) household size.

List the people in your parents household, include:

- Yourself and your parent(s) (including a stepparent) even if you don't live with your parent(s). Exclude a parent who has died or is not living in the household due to separation or divorce. Include a parent who is on active duty in the U.S. Armed Forces apart from the family.
- The student's siblings if the following are true:
 - They live with the student's parents (or live apart because of college enrollment)
 - They receive more than half of their support from the student's parents, and
 - They will continue to receive more than half their support from the student's parents during the award year.
- Other persons if the following are true:
 - They live with the student's parents,
 - They receive more than half of their support from the student's parents, and
 - They will continue to receive more than half their support from the student's parents during the award year.

Write the names of all household members, as defined above. Attach a separate sheet if you need more space.

Note: If parents are legally separated or divorced, use the parent whose information, consent and approval were used on the FAFSA.

Full Name	Age	Relationship
		Self
Matthew Morton <i>(example)</i>	17	Brother

Explain any changes that have occurred in your parent(s) household: _____

REQUIRED SIGNATURE

By signing, I certify that I have read this form in its entirety and that all the information reported on this worksheet is complete and correct. I realize that I may be asked to provide supporting documentation to verify the above information.

Student's Signature: _____ Date: _____ / _____ / _____

Parent's Signature: _____ Date: _____ / _____ / _____

Scan & e-mail to: Finaid@llu.edu, Fax to: (909)558-4283 or Mail to: LLU Office of Financial Aid, 11149 Anderson St., Loma Linda, CA 92350

If you have any questions please email Finaid@llu.edu or call (909) 558-4509