

2024 - 2025 Verification Worksheet Dependent Student

Your 2024–2025 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called Verification. The law states that before awarding any Federal Student Aid, we must ask you to confirm the information you and your parents reported on your FAFSA. To verify that you provided correct information, the financial aid office will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information will be corrected.

A. Demographic Information:

Student's Last Name

Student's First Name

Student's M.I.

Student ID (CWID)

B. Family Information - List your Family Size - Please Include:

- Yourself, the student.
- **The student's parent(s)** (including a stepparent or adoptive, if applicable) even if the student is not living with them. Exclude a parent who has died or is not living in the household because of separation or divorce. Include a parent who is on active duty in the U.S. Armed Forces apart from the family.
- Brothers and sisters, <u>if all of</u> the following conditions are true:
 - They live full-time with the student's parent(s), or live apart because of college enrollment
 - They receive more than half of their support from the student's parent(s) (whose information is listed on the FAFSA) and they will continue to receive more than half of their support from the student's parents during the award year.
- Other family members, <u>if all of</u> the following conditions are true:
 - o They live full-time with the student's parent(s) whose information is listed on the FAFSA
 - They receive more than half of their support from the student's parent(s) (whose information is listed on the FAFSA) and they will continue to receive more than half of their support from the student's parents during the award year.
 - Please note that if needed, we may request more information to validate support for other family members.

Include the **name of the college for any household member, excluding your parent(s),** who will be enrolled, <u>at least half</u> <u>time</u> in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2024, and June 30, 2025. *If more space is needed, attach a separate page with the student's name and CWID at the top.*

YOU MUST COMPLETE THE NEXT PAGE BEFORE SUBMISSION

Submit to The Citadel Office of Financial Aid & Scholarships via our Secure Upload Site at: https://web.citadel.edu/forms/secureupload/

Full Name	Age	Relationship	College (if applicable)	Will be Enrolled at
				Least Half Time
Missy Jones (example)	18	Sister	Central University	Yes
		Self		

C. Certification and Signatures

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and one parent must sign and date.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student's Signature

Date

Parent's Signature

Date