WashU

2026-2027 Verification Worksheet for Dependent Students

Student Name: _____Student ID Number (if known): _____

Household Information

List the people in your household, including:

- yourself and your parents, even if you do not live 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.
- your siblings if the following are true:
    1. they live with the student's parents (or live apart because of college enrollment),
    2. they receive more than half of their support from the student's parents, and
    3. they will continue to receive more than half their support from the student's parents from July 1, 2026 to June 30, 2027.
- Other people, **if** they now live with your custodial parents **and** your parents provide more than half of their support **and** your parents will continue to provide more than half of their support through June 30, 2027.

Write the name, age, and relationship of all household members below. If applicable, write the name of the college, university, or program for any family member (other than your parent[s]), who will be attending at least half-time between July 1, 2026 and June 30, 2027, and will be enrolled in a degree, diploma, or certificate program. Attach a separate page if you need more space.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half-Time (Yes or No)
Example: Martha Jones	*20*	*Sister*	*University of Missouri*	*Yes*
		Self		
		Parent 1	Not Applicable	
		Parent 2	Not Applicable	

Signatures (Required)

By signing below, we certify that all of the information reported on this worksheet is complete and accurate. The student and at least one parent must sign.

_____ _____

Student's Signature Date

_____ _____

Parent's Signature Date