2026-2027 Verification Worksheet for Independent Students

Student Name: _____Student ID Number: _____

Household Information

List the people in your household, including:

- yourself and your spouse if you have one, and
- your (or your spouse's) children, even if they live apart due to college enrollment, if they receive more than half of their support from you, and will continue to do so from July 1, 2026 to June 30, 2027.
- Other people, **if** they now live with you **and** you or your spouse provide more than half of their support **and** will continue to provide more than half of their support from July 1, 2026 to 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		

Signatures (Required)

By signing below, I (we) certify that all of the information reported on this worksheet is complete and accurate.

_____ _____

Student's Signature Date

_____ _____

Spouse's Signature (Optional) Date