HOUSEHOLD VERIFICATION FORM
DEPENDENT STUDENT
Financial Aid Office
2020/2021

STUDENT NAME: ___________________________ BMCC ID: _______________________

HOUSEHOLD INFORMATION
Please list the people in your household, including:

- You
- Your parents (including stepparent) who you live with or you included on the FAFSA
- Your parents’ other children (per description below even if the child does not live with your parents)
  - if your parents will provide more than half of the children’s support from 7/1/20 through 6/30/21 or
  - If the other children would be required to provide parental information if they were completing a FAFSA for 2020–2021.
- Other people (additional documentation may be needed)
  - if they now live with your parents and
  - your parents provide more than half of the other person’s support, and
  - Will continue to provide more than half of that person’s support through 6/30/21

Number in College: Include in the space below information about any household member, who is, or will be, enrolled at least half time in a degree, diploma, or certificate program any time between 7/1/20 and 6/30/21.

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<th>Full Name</th>
<th>Age</th>
<th>Relationship to Student</th>
<th>College</th>
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(Attach additional sheet for other household members, if necessary)

Do your parent’s dependents have their own source of income (such as work, unemployment, child support, social security, SNAP or TANF benefits, other)? Please list amount of 2019 and/or 2020 income and sources of income for each person listed above.

___________________________________________________________________________________
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Signing this form certifies that all the information reported on it is complete and correct.

Student Signature: ___________________________________________ Date: ________________

Parent Signature: ___________________________________________ Date: ________________

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