

A. STUDENT INFORMATION

## 2022-2023

DEP - Household

## **Verification of Household Members**

Federal Student Aid Programs

To complete verification for 2022-2023, we need to verify the following information. Federal regulations give our office the right to request this information before awarding financial aid. After reviewing, WVC may make corrections electronically to have your information reprocessed. To avoid delays in processing your financial aid, please return verification items as soon as possible.

Wenatchee Valley College must review the requested information, under the financial aid program rules (CFR Title 34, Part 668).

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

Last Name			First Nam	ne	MI	SSN:			
						SID:			
Address (include apt # if applicable)  Date of Birth									
City		State Z	IP Code	-			Daytime Phone (include area code)		
-	AMILY INFORMATION								
		ected helov	w If any ho	ousehold member w	ill he	attendi	ing college at least half time		
List current household members as directed below. If any household member will be attending college at least half time, enrolled in a degree or certificate program, include the name of the college. If you need more space, attach a separate page.									
** If you have any questions about who to include in your parents' household, contact the financial aid office. **									
Inclu					Include other people as part of your parents' household ONLY IF:				
	Yourself <b>(list yourself first)</b> Your parent or parents (even if you liv		They are currently living with your parents, and your parents provide more than half of their support						
	of gender or marital status, include be		and will continue to provide more than half of their support from						
1	together. Include stepparent if legal p		July 1, 2022 through June 30, 2023.						
✓ Your parents' other dependent children (under age 24), if your parent(s) will provide more than half of their support from July									
1, 2022 through June 30, 2023. ****Please be consistent with reference to Parent #1 and Parent #2 throughout process.***									
	Full Name Age			Relationship					
	(example) Martha Jones		24	Mother			City University		
				STUDENT		W	enatchee Valley College		
			+						
Sign	This Worksheet			WARNING: If you purposely give false or misleading information on this					
By signing this worksheet, I (we) certify that all the information					worksheet, you may be fined, sentenced to jail, or both.				
report	ed on this worksheet is complete	and correc	t.	Return this c	omnle	eted for	m (with required documents) to:		
				Wenatchee \	-				
Student D			ate	Financial Aid	_	_	Fax 509-682-6811		
				1300 5 <sup>th</sup> Stre	et – V	Venatch	i Hall Email: financialaid@wvc.edu		
Parent (required – one parent whose data is on FAFSA)			ate	Wenatchee V	VA 98	801	http://www.wvc.edu		
					For	□V1	□V4 □V5 □0B □ 5# □ 5	\$	
					Office	TR/EI	FC/_ DK o	r	
					Use	_	orrected to/		
					Only	Initia	ls: Date:		