



2016-17 Household Size Verification Form

Last Name

First

Middle

Student ID

Verification of Household Size

If you are a **Dependent student** on the FAFSA, list the people in your household including:

- Yourself and your parent(s) (**including stepparent**) even if you don't live with your parent(s)
- Other children, even if they don't live with your parent(s) if
 - *Your parent(s) provide **more** than half of their financial support from July 1, 2016 to June 30, 2017, or
 - * The children would be required to provide parental information when applying for financial aid
- Other people only if they now live with your parent(s) and your parent(s) provide **more** than half of their financial support and will continue to provide **more** than half of their financial support from July 1, 2016 through June 30, 2017.

If you are an **Independent student** on your FAFSA, list the people in your household including:

- Yourself, and your spouse (if you are married)
- Your children, if you will provide **more** than half of their financial support from July 1, 2016 to June 30, 2017.
- Other people only if they now live with you, and you will provide **more** than half of their financial support and will continue to provide more than half of their financial support from July 1, 2016 through June 30, 2017.

FULL NAME	AGE	RELATIONSHIP TO STUDENT	ATTENDING COLLEGE?
		SELF	YES

Important Notes:

- *Do not make corrections to your FAFSA or Admissions Application after turning in this form
- *Your financial assistance eligibility will not be determined until all forms listed under "required documents by year" in Web Advisor are received (or waived) and reviewed for accuracy.
- *Per Federal regulations, you may not receive grants or loans at two separate institutions.

By signing this form, I verify that I or my parents will be supporting the person(s) listed above, even those who are not my siblings or my parent's children, more than 50% now and through 06/30/17.

Student Signature

Date

Parent Signature

Date

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

All citations for financial assistance programs (i.e., student loans, work compensations, grants, scholarship, special funds, subsidies, prizes, etc.), will be considered by the Palo Verde Community College District without regard to ethnic group identification, national origin, religion, age, gender, gender identity, gender expression, race, color, ancestry, genetic information, sexual orientation, physical or mental disability, or any characteristics listed or defined in section 11135 of the Government Code or any characteristic that is contained in the prohibition of hate crimes set forth in subdivision (1) of section 442.6 of the California Penal Code, or any other status protected by law. Alternate formats for this material are available to individuals requiring disability accommodation. Please contact the office of Diversity, Equity and Compliance at (951)222-8039

Todas las solicitudes para programas de asistencia financiera (por ejemplo, préstamos estudiantiles compensación de trabajo, subvenciones, becas, fondos especiales, premios, etc.), serán considerados por el Distrito de Palo Verde Community College independientemente de identificación étnica, origen nacional, religión, edad, género, identidad de género, expresión de género, raza, color, ascendencia, información genética, orientación sexual, discapacidad física o mental, o cualquier característica listados o definidos en la Sección 11135 del Código de Gobierno o cualquier característica que se encuentra en la prohibición de los crímenes de odio establecidos en la subdivisión (1) de la Sección 422.6 del Código Penal de California, o cualquier otra condición protegida por la ley. Formatos alternos para este material están disponibles para personas que requieren alojamiento de discapacidad. Por favor comuníquese con la oficina de Diversidad, Equidad y Respeto al (951) 222-8039