

Verification of Household Members

Federal Student Aid Programs

To complete verification for 2021-2022, 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.

A. STUDENT INFORMATION

Last Name	First Name	MI	ID#:	***ctcLink ID required**
Address (include apt # if applicable)	Date of Birth			
City	State	ZIP Code	Daytime Phone (include area code)	

B. FAMILY INFORMATION

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.****

Include:

- Yourself (list yourself first)
- Your parent or parents (even if you live on your own). (Regardless of gender or marital status, include both legal parents who live together. Include stepparent if legal parent has remarried.)
- Your parents' other dependent children (under age 24), if your parent(s) will provide more than half of their support from July 1, 2021 through June 30, 2022.

Include other people as part of your parents' household ONLY IF:

- They are currently living with your parents, and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2021 through June 30, 2022. **Documentation of support may be required.**

Please be consistent with reference to Parent #1 and Parent #2 throughout process.

Full Name	Age	Relationship	College
<i>(example) Martha Jones</i>	<i>24</i>	<i>Mother</i>	<i>City University</i>
		STUDENT	Wenatchee Valley College

Sign This Worksheet

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

Student	Date
Parent (required – one parent whose data is on FAFSA)	Date

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Return this completed form (with required documents) to:

Wenatchee Valley College	Phone 509-682-6810
Financial Aid Office	Fax 509-682-6811
1300 5 th Street – Wenatchi Hall	Email: financialaid@wvc.edu
Wenatchee WA 98801	http://www.wvc.edu

For	<input type="checkbox"/> V1 <input type="checkbox"/> V4 <input type="checkbox"/> V5 <input type="checkbox"/> 0B <input type="checkbox"/> 5# <input type="checkbox"/> 5\$
Office	TR/EFC _____ / _____ <input type="checkbox"/> OK or
Use	<input type="checkbox"/> Corrected to _____ / _____
Only:	Initials: _____ Date: _____