



2020-2021 FAFSA Verification of Household Size



All documents should be submitted to:

Neosho County Community College-Office of Student Financial Aid
800 W 14th Street, Chanute, KS 66720 Fax# 620.432.0447 OR 900 E Logan Street, Ottawa, KS 66067 Fax# 785.248.2830
finaid@neosho.edu

No federal financial aid will be awarded to you until the verification process is complete.

Student Information

Last Name First Name M.I. NCCC Student ID or SSN Phone number to best reach you (include area code)

Household Information

In the grid below list the following people:

- Yourself
- Your Spouse (if married)
- Your/your spouse's dependent children (if you/your spouse will provide more than half their support from July 1, 2020 through June 30, 2021, **OR** if the children could answer "No" to every question in the Step Three Student Dependency Status section of the FAFSA, meaning the child must provide parental data when completing a FAFSA)

Include other people as part of your family only if:

- They lived with you/your spouse and received more than half their support from you/your spouse at the time you completed your FAFSA
- They will continue to get more than half their support from you/your spouse from July 1, 2020 through June 30, 2021.

Full Name	Relationship to Student	Age	Will live with you/ your spouse?	Will receive more than half of his/ her support from you/your spouse?	College Attending in 2020-2021 school year*	Enrolled at least half time?
			O Yes O No	O Yes O No		O Yes O No
			O Yes O No	O Yes O No		O Yes O No
			O Yes O No	O Yes O No		O Yes O No
			O Yes O No	O Yes O No		O Yes O No
			O Yes O No	O Yes O No		O Yes O No
			O Yes O No	O Yes O No		O Yes O No
			O Yes O No	O Yes O No		O Yes O No

***IMPORTANT NOTE:** Always count yourself as a college student. Of those listed include name of college only if they will attend, at least half-time between July 1, 2020 and June 30, 2021, a program that leads to a college degree or certificate. If you need additional space, attach separate page.

Note: Additional documentation may be required regarding the household members enrolled in college.

Signatures

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

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

Student Signature

Date

The valid OMB control number for information collection 1945-0041.