

2024–2025 Dependent Family Size Verification Form

Your financial aid application was selected by the U.S. Department of Education to undergo a process called verification. You and your parent must complete, sign, and submit this form listing the name and age of each of your parent(s)' family members and their relationship to you. The form must be submitted to the Financial Aid Office to continue the review process and determine your eligibility for federal student aid.

A. Student Information			
Student's Name (Last, First, M	Student ID - REQUIRED		
B. Family Information List the people in your parent(s)	family. Include the following:		
 Your parent(s)' dependence more than half of their family size, though the half of their support from the open of their support from the continue to provide more more than the support from the provide more than the support from the	support between July 1, 2024 and July family size can be updated if the chi	pecause of college enroune 30, 2025. Unborn ld is born during the avoir parent(s) provide more June 30, 2025.	ollment), if your parent(s) will provide children should <u>not</u> be included in the ward year and will receive more than than half of their support and will
First Name	Last Name	Age	Relationship to You
EXAMPLE: Missy	Jones	18	Sister
			Self
information is attached. The stu	fies that all the information reported of dent and one parent MUST sign and	date this section.	mplete, correct, and any additional rou may be fined, sentenced to jail,
Student's Signature			Date
Parent Signature			 Date

We have live assistance available 24/7 at our online Student Services Support Center: visit https://mysupport.germanna.edu to chat, create a case and submit documents or call 855-874-6681.