Southwestern Michigan College

2023–2024 Household Size Verification– Independent Student

Financial Aid Office, 58900 Cherry Grove Road, Dowagiac, MI 49047
Phone: 269.783.2143 Fax 269.783.2114 Email: finaid@swmich.edu

Your 2023–2024 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, attach any required documents, and submit the form and other required documents to the Financial Aid Office within 14 days. Financial aid will not be authorized to your account until the verification process is complete and your corrected file is back from the Federal Processor. You may be asked for additional information. If you have questions about verification, call 269-783-2143 as soon as possible so that your financial aid will not be delayed.

Independent Student's Information

Student ID# N ☐☐☐☐☐☐☐☐

Last Name First Name M.I.

Date of Birth

Street Address (include apt. no.)

Home Phone Number (include area code)

City State Zip Code

Cell Phone Number (include area code)

Student's Email Address

Independent Student's Family Information

1. List the following people on the chart below:
   - Yourself
   - Your spouse (if married)
   - Your (or your spouses') other children if you will provide more than half of their support from July 1, 2023, through June 30, 2024, or if the child would be required to provide your parental information if they were completing a FAFSA for 2023–2024. Include children who meet either of these standards, even if they do not live with you.
   - Other people ONLY if they now live with you and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2024. **Do not include foster children, children you pay child support for, or others who live in your household but are not financially supported by you or your spouse.*
2. Write the name of the college for any household member listed who **will be enrolled** in college at least half-time between July 1, 2023, and June 30, 2024. Colleges listed must be eligible to participate in Federal Title IV financial aid programs. *If you need more space, attach a separate page.*

Full Name	Age	Relationship to Student	College Attending
		Student/Self	

Student's Signature **Date**

The person signing this worksheet certifies that all of the information reported on it is complete and correct. WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both. Please note that submission of this form electronically should be encrypted to protect any personal or confidential information.