



2018-2019
Household Size/College Verification

Student's Name _____ **Student's MSU Email Address** _____ **(9 digit) MSU ID** _____

Your application has been selected for Verification. We are required by federal law to compare the information from your Free Application for Federal Student Aid (FAFSA) with the information provided on this form. **List household information as of today's date.**

- * We will update your FAFSA, if needed, based on the information provided on this form.
- * We cannot process your financial aid until all required financial aid documents have been submitted.

Dependent students complete Section A; Independent students complete Section B.

Section A: Dependent Student Household *(parent information IS required on FAFSA)*

Name of Parent (and spouse if married)	Age	Relation to Student

Name of Children (Parent's/Spouse's) – do not list student (<i>& Others living with parent AND parent provides over half of their support</i>)	Age	Relation to Student	*College Name

*List college name for those attending between 7/1/18 and 6/30/19, who will be enrolled at least ½ time in a degree/certificate program.

Section B: Independent Student Household *(parent information is NOT required on FAFSA)*

Name of Student's Spouse	Age	College Name (if attending college in the 2018-2019 year)	List spouse's MSU ID# (if applicable)

Name of Children (Student's/Spouse's) (<i>& Others living with you AND you/spouse provide over half of their support</i>)	Age	Relation to Student	*College Name

*List college name for those attending between 7/1/18 and 6/30/19, who will be enrolled at least ½ time in a degree/certificate program.

Signature

By signing this form, I certify that I have provided complete and accurate information to the best of my knowledge.

Warning: Purposely giving false or misleading information may result in a fine, imprisonment, or both.

Student Signature _____ **Date** _____

Student Spouse Signature _____ **Date** _____
(If married, requires spouse and student signatures)

Parent Signature _____ **Date** _____
(Parent signature required ONLY for dependent students)