KANSAS STATE UNIVERSITY | Office of Student Financial Assistance

2020-2021

Dependent Household Size and Number in College Clarification Form

Submit securely online:
ksu.edu/sfa/upload

Deliver in person:
119 Anderson Hall | 919 Mid-Campus Drive North
Manhattan, Kansas 66506-0107

Student's Name (Last, First, MI)

Wildcat Identification Number

Student's K-State Email Address

Student's Phone Number

There is an inconsistency with the number of family members and/or the number of people attending college at least half-time between your original Dependent Verification Form and your FAFSA.

Please list all members of your household, including:

- Yourself, even if you do not live with your parent(s).
- Your parent(s)/step-parent if they are living together, even if they are not married.
- Your parents' children, **if** they receive more than half of their support from your parents from July 1, 2020 through June 30, 2021 **or** they would be required to provide parental information when applying for federal financial assistance.
- Other people, **if** they now live with your parents, they receive more than half of their support from your parents **and** will continue to do so from July 1, 2020 through June 30, 2021.
  Note: Support is defined as providing food, housing, medical/dental care or health insurance, car insurance, money or other financial resources.

Helpful Hints:

- The parent listed below should be the parent whose information was reported on your FAFSA.
- Provide the complete date of birth for yourself and each family member.
- **Do not** include a parent not living in the household due to separation or divorce.
- **Do not** include foster children or children who receive child support funding from your parent(s).
- **Do include** a step-parent if your biological parent has remarried.

Full Name of Family Member Begin with yourself	**Date of Birth** Ex. 11/17/2001 Do not leave blank.	**Relationship to Student** Self, mother/step-mother, father/step-father, brother, sister, etc.	**Full Name of College or University** For you and any family member who will be working toward degree completion **at least half-time** during the 2020-2021 academic year. **Do not** list high schools or names of colleges or universities that your parents are attending.
		Self	*Kansas State University*

Certification Statement

By signing this verification form, I certify that all of the information reported is complete and accurate.

Signature of Student (required) Date
Digital signatures are not accepted.

Signature of Parent on FAFSA (required) Date
Digital signatures are not accepted.