



# Southwestern Michigan College

## 2023-2024 Household Size Verification- Dependent Student



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

Your 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 you and your parents 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 and at least one parent 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.

### Dependent 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			

### Dependent Student's Family Information

1. List the following people on the chart below:
  - Yourself and your parent(s) (including a stepparent) even if you do not live with your parent(s). *If your parents are divorced, list only the parent (and stepparent if applicable) whose information you used to complete the FAFSA.*
  - Your parent(s)' other children if your parent(s) will provide more than half of their support from July 1, 2023, through June 30, 2024, or if the other children would be required to provide parental information if they were completing a FAFSA for -2024. Include children who meet either of these standards, even if they do not live with your parent(s).
  - Other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2024.
2. Write the name of the college for any household member listed, excluding your parent(s), 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

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

Each 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.**