

DEPENDENT STUDENT 2024-2025 VERIFICATION WORKSHEET FEDERAL STUDENT AID PROGRAMS

A. Student Information					
CF ID No.:		Birth Date: MM/DD/YYYY			
Legal Name: Last		First	Middle (co	plete) Jr., etc.	
B. Family Information					
 Yourself and your paren Your parents' other child support from July 1, 202 applying for Federal Stud 	t(s) (including steppa dren even if they do a 4, through June 30, 2 dent Aid, and v live with your pare	rent) even if you do renot reside with your p 2025, or (b) the childrents, and your parents	fined below. You must include not reside with your parents, and parent(s), if (a) your parents will en would be required to provide provide more than half of the June 30, 2025.	d provide more than e parental informatio	n when
	at least half-time bet	tween July 1, 2024, an	he college for any household m d June 30, 2025, and will be en- te page.		
Full Name	Date of Birth	Relationship	College Name	If family member is CF student, provide CF ID number	Will be enrolled at least half time
Missy Jones (example)	MM/YY/YYYY	Sister	Central University	123456	Yes
		Self	•		
Note: We may require addition			elieve that the information rega	arding the household	members
C. Sign this Worksheet					
By signing this worksheet, we	e certify that all the ir	nformation reported o	on it is complete and correct. A	t least one parent mus	st sign.
Student Signature		Date: MM/I	misleading in	Warning: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.	
Parent Signature		Date: MM/I	 DD/YY		

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