

**2020 - 2021 DEPENDENT HOUSEHOLD SIZE FORM**

STUDENT NAME: \_\_\_\_\_ SPU ID: \_\_\_\_\_

This form is to verify the total number of members in your household and the number of members currently in college as listed on your 2020-2021 Free Application for Federal Student Aid (FAFSA). **Review the following instructions carefully before completing this form. Please complete all sections.**

List the people your parent(s) will support between **July 1, 2020 and June 30, 2021**.

Include:

- Yourself, even if you do not live with your parent(s)
- Your parent(s) (including stepparent)
- Your siblings and/or your parents’ other children **if** they will receive **more than half** of their support from your parents from July 1, 2020 to June 30, 2021 or **if** your parents would be required to provide information for these children when filing a 2020-2021 FAFSA. Include children who meet either of these standards, even if they do not live with your parent(s).
- Other people if they currently live with your parents, your parents provide **more than half** of their support, **and** your parents will continue to provide this support between July 1, 2020 and June 30, 2021 (support includes money, gifts, loans, housing, food, clothes, car, medical and dental care, payment of college costs, etc.). Do not include foster children.
- Include the name of the college for any household member (except parents) who will be enrolled, at least half time in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2020, and June 30, 2021. **Do not include siblings in Running Start.**

**Be sure to list parents and to complete all fields. Attach an additional sheet if necessary.**

Name	Relationship to Applicant	Age	2020 - 2021 College Name (If applicable)
	Self		SPU

**By signing this Verification Statement, we attest that all information reported on this form is true and complete to the best of our knowledge. If asked, we agree to submit documentation supporting the information provided on this form.**

**WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to prison, or both.**

\_\_\_\_\_  
Student Signature    Date    Phone    Email

\_\_\_\_\_  
Parent Signature    Date    Phone    Email