



Family Size Verification Form 2017-2018

Office of Financial Aid
2500 N Robison Rd. Texarkana, Texas 75599
Phone: 903-823-3267 | financial.aid@texarkanacollege.edu



Student's Printed Name: _____ TC ID: _____

Primary Phone Number: _____

Your 2017-2018 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called Verification. The Financial Aid Office is required to confirm the information you reported on your FAFSA. You must complete, sign, and submit this worksheet to our office. You may be asked to submit additional information and/or documentation.

Independent Student's Family Information (List the people in your household below including)

- **Yourself** and your spouse, if you are married.
- Your children, or spouse's children, if any, if you will provide more than half of their support from July 1, 2017, through June 30, 2018, even if the child does not live with you.
- Other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2018.

Dependent Student's Family Information (List the people in your household below including)

- **Yourself** and your parent(s) (including a stepparent) – even if you don't currently live with your parent(s).
- Your parent(s)' other children – if your parent(s) will provide more than half of their support from July 1, 2017 through June 30, 2018. 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, 2018.

Include the name of the college for any household member who will be enrolled at least half time (6 credit hours), in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2017 and June 30, 2018. **Make sure and include everyone in household even if not in college.** (Use back of form if more space is needed)

| Full Name | Age | Relationship | College | Enrolled at least Half Time |
|-----------------|-----|--------------|-------------------|-----------------------------|
| EX: Marty Jones | 18 | Brother | Texarkana College | Yes |
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Certification and Signature

By signing this form, you certify and understand the following:

- The information reported on this form is complete and correct to the best of your knowledge.
- If asked by the Financial Aid Office, you will provide documentation needed to confirm family size.

Student's Signature

Date

Parent's Signature (If Dependent Student)

Date