

2024-2025 Independent Family Size

Your student's 2024-2025 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 must ask you to confirm the information reported on your student's FAFSA. To verify that the information is correct the financial aid administrator at **Alamance Community College** will compare your student's FAFSA with the information on this worksheet and with any other required documents. If there are differences, your student's FAFSA information may need to be corrected. You must complete and sign this worksheet and submit the form and other required documents to the financial aid office at **Alamance Community College**. **Alamance Community College** may ask for additional information. If you have questions about verification, contact the Financial Aid Office as soon as possible so that your student's financial aid will not be delayed.

Print Student Name _____ Student ID: _____

Family Size – Includes the following:

- **The student**
- **The student's spouse, if applicable**
- **The student's dependent children if the following are true:**
 - They live with the student (or live apart because of college enrollment),
 - They receive more than half of their support from the student, and
 - They will continue to receive more than half their support from the student during the award year.
- **Other persons if the following are true:**
 - They live with the student,
 - They receive more than half of their support from the student, and
 - They will continue to receive more than half their support from the student during the award year.

The provided criteria for “dependent children” or “other persons” align with the requirement that family size align with whom the parent **could** claim as a dependent on a U.S. tax return if the parent were to file a U.S. tax return at the time of completing the 2024-2025 FAFSA. As a result, the parent should not include any unborn children in the family size.

If more space is needed, attach a separate page with the student's name and Student ID Number at the top.

Full Name	Age	Relationship
<i>Missy Jones (example)</i>	<i>18</i>	<i>Sister</i>
		<i>Self</i>

Certification and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student whose information was reported on the FAFSA must sign and date.

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

Student's Signature (Required) _____ **Date** _____

Do not mail this worksheet to the U.S. Department of Education. Submit this worksheet to the financial aid administrator at your school. You should make a copy of this worksheet for your records.