



OFFICE OF FINANCIAL AID

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2019-2020 Household Verification Form

Student Name: _____

Student ID: _____

Please read the following information about dependent and independent students and then list all the people in the household (as indicated below). Additionally please list the name of the college for any household member, excluding parents, who will be attending college at least half-time between July 1, 2019 and June 30, 2020.

Dependent Student* Please list below:	Independent Student* Please list below:
<ul style="list-style-type: none"> You and your parents with whom you live, including step-parents 	<ul style="list-style-type: none"> You (student) and your spouse, if married
<ul style="list-style-type: none"> Your parents' DEPENDENT children if your parents will provide MORE than 50% of their support from 7/1/19-6/30/20 	<ul style="list-style-type: none"> Your dependent children, if you will provide more than 50% of their support from 7/1/19-6/30/20.
*A student is considered DEPENDENT if he/she was required to provide parental data on the FAFSA	** A student is considered INDEPENDENT if he/she was not required to provide parental data on the FAFSA

Household member name	Age	Relation to student	Name of college attending 2019-2020	Number of credits enrolled per term in 19-20	Level in college in 19-20 (grad or undergrad)
		self	Saint Anselm		undergrad

By signing this worksheet, we certify that all the information reported on it is complete and correct. **The student and at least one custodial parent must sign (if a dependent student). Electronic signatures are NOT acceptable.**

Student: _____ Date: _____
(actual signature required)

Custodial Parent: _____ Date: _____
(actual signature required)

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