



2026-2027 Household Verification Worksheet

Last Name **First Name** **Student's M.I.** **Student ID#**

Dependent Students: List below the people in your parent(s)' household. Include:

- Yourself and your parent(s) (including a stepparent) even if you don't 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, 2026, through June 30, 2027, or if the other children would be required to provide parental information if they were completing a FAFSA for 2026–2027. 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, 2027.

Independent Students: List below the people in your household. Include:

- Yourself.
- Your spouse, if you are married.
- Your children, if any, if you will provide more than half of their support from July 1, 2026, through June 30, 2027, or if the child would be required to provide your information if they were completing a FAFSA for 2026–2027. Include children who meet either of these standards, even if they do 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, 2027.

Full Name	Age	Relationship	College	Will Be Enrolled at Least Half Time
<i>Missy Jones (example)</i>	<i>18 (example)</i>	<i>Sister (example) Self (example)</i>	<i>Central University (example)</i>	<i>Yes (example)</i>

I certify that all of the information reported on this worksheet is complete and correct.

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 **Date**

Parent's Signature (*dependent students only*) **Date**

Please email this form to financialaid@franu.edu.