



2017-2018 Household Form

This form cannot be faxed. Email scanned copy to: financialaid@labette.edu or Return this form to the address below.
Labette Community College
Financial Aid
200 South 14th · Parsons, KS 67357

Your FAFSA was selected for a review process called “**VERIFICATION.**” Return this form with documents attached, if required. If you do not complete the verification process, you forfeit federal student aid eligibility, including student loans. Aid will not disburse if verification is not complete.

Student’s Name

Student ID or Social Security Number

HOUSEHOLD LISTING (attach a separate page if necessary)

If you are a Dependent Student: (Parental data was required on the FAFSA)

- The student.
- The parents (including a stepparent) even if the student doesn’t live with the parents.
- The parents other children if the parents will provide more than half of the children’s support from July 1, 2017, through June 30, 2018, or if the other children would be required to provide parental information if they were completing a FAFSA for 2017–2018. Include children who meet either of these standards even if a child does not live with the parents.
- Other people if they now live with the parents and the parents provide more than half of the other person’s support and will continue to provide more than half of that person’s support through June 30, 2018.

If you are an Independent Student: (Students without parental data required on the FAFSA.)

- The student.
- The student’s spouse, if the student is married.
- The student’s or spouse’s children if the student or spouse will provide more than half of the children’s support from July 1, 2017, through June 30, 2018, even if the children do not live with the student.
- Other people if they now live with the student and the student or spouse provides more than half of the other people’s support and will continue to provide more than half of their support through June 30, 2018.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
				July 1, 2017 through June 30, 2018 (Yes or No)
<i>Missy Jones (example)</i>	<i>18</i>	<i>Sister</i>	<i>Central University</i>	<i>Yes</i>
		Self	Labette Community College	

Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

Certifications and Signatures

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

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

Print Student’s Name

Student’s ID Number

Student’s Signature

Date

Parent’s Signature
(Dependent Students Only)

Date