

2026-2027 Dependent Verification Worksheet

Your 2026-2027 Free Application for Federal Student Aid (FAFSA) was selected for verification. You must confirm the information you reported on your FAFSA. You, and a parent whose information was reported on the FAFSA, must complete and sign this institutional verification worksheet, attach any required documents, and submit the completed form to the Financial Aid Office. Contact us immediately with questions to prevent your financial aid being delayed.

A. Student Information

Last Name	First Name	M.I.	Student ID
Address (include apt. no.)			Date of Birth
City	State	Zip	Phone Number (include area code)

B. Family Size

List below the people in the family. Includes the following:

- **The student (you).**
- **The students' parents (including a stepparent), even if the student is not living with them.** Exclude a parent who has died or is not living in the household because of separation or divorce. Include a parent who is on active duty in the U.S. Armed Forces apart from the family.
- **The student's siblings if the following are true:**
 - They live with the student's parents (or live apart because of college enrollment);
 - They receive more than half of their support from the student's parents, and
 - They will continue to receive more than half their support from the student's parents during the award year.
- **Other persons if the following are true:**
 - They live with the student's parents;
 - They receive more than half of their support from the student's parents, and
 - They will continue to receive more than half their support from the student's parents 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 2026-2027 FAFSA. As a result, the parent should not include any unborn children in the family size.

If more space is needed, use the back of this form or provide a separate page with the student's name and ID number at the top.

Full Name	Age	Relationship	Full Name	Age	Relationship
Martha Jones (example)	18	Sister			
		Self			

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

Student's Signature (Typed signature not accepted) _____ Date _____

Parent's Signature (Typed signature not accepted) _____ Date _____

Lewis-Clark State College is an Equal Opportunity Provider, all forms are available in alternative formats to assist persons with disabilities. Please give reasonable notice to the Financial Aid Office. TTY 711 or <https://www.sorenson.com/video-relay/>