VHHI24
V1 Independent

2026-27 Household Verification - Independent

Federal Student Aid Programs

A. Student Information

Last Name | First Name | M.I. | Student ID#

Address (include Apt. #) | Date of Birth

City | State | ZIP Code | Phone Number (include area code)

B. Family Information

1. What is your current marital status?

☐ Single ☐ Married or Remarried* ☐ Separated

☐ Divorced ☐ Widowed

*If you are married as of date you filed the FAFSA, you must include your spouse's information.

2. List the people in your household, including:

- Yourself, and your spouse, if applicable.
- Your dependent children, if you will provide more than half of their support during the award year, even if they do not live with you. Do not list unborn children.
- Other persons 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 during the award year. Please note the financial aid office may require proof of the data below, including, but not limited to non-filer forms from the IRS or other documentation of no/low income.

Write the names of all household members in the space(s) below:

Full Name	Age	Relationship to Student
		Self / Student

C. Sign this Worksheet

By signing below, I certify that all the information reported is complete and correct.

Student Signature (Required) | Date

Spouse Signature | Date