

# 2026-27 V1 Dependent Student Income and Family Size Worksheet

## Federal Student Aid Programs

Your application was selected for review in a process called “verification.” We must compare information you provided on your FAFSA with information provided on this form and, if requested, official 2024 IRS tax return transcripts and/or 2024 W-2 earnings statements. The law requires us to request this information before awarding financial aid. If there are differences between our FAFSA data, the information provided on this worksheet, or your financial documents, we may need to submit corrections to have your eligibility determined.

Complete this form and submit it to the Office of Financial Aid as soon as possible to prevent any delays with your financial aid.

**What you should do:**

1. Complete all applicable sections of this worksheet.
2. If you have questions about completing this worksheet, please contact your campus Financial Aid Office.
3. Submit this signed worksheet and any other requested documents to your campus Financial Aid Office. If you are uncertain about which documents to attach to this worksheet, access your MySCCC student dashboard via [sunysuffolk.edu](http://sunysuffolk.edu).

SCCC must review the requested information, and make any required corrections, under the financial aid program rules (34 CFR, Part 668).

### A. Student Information

Last Name	First Name	M.I.	Student ID#
Address (Include apt. no.)			Date of Birth
City	State	ZIP Code	Phone Number (Include area code)

### B. Family Information – Provide information about the parent contributors/s on your FAFSA

The information in sections B and D of this form is asking about the parent/s and household members who are included on your FAFSA application. This information may be different than your custodial parent.

1. What is the marital status of the parent/s listed on your FAFSA?
 

<input type="checkbox"/> Married	<input type="checkbox"/> Remarried to Step-parent	<input type="checkbox"/> Divorced or Separated*	<input type="checkbox"/> Never Married
<input type="checkbox"/> Unmarried and both biological parents living together ( <b>both parents income information will be required on the FAFSA</b> )			<input type="checkbox"/> Widowed
  
2. List the people in your household, including:
  - Yourself, and your parent/s (including step-parents), or unmarried biological parents residing together.
  - Your siblings, if your parent/s will provide more than half of their support during the award year, even if they do not live with you.
  - Other persons 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 during the award year.

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

Full Name	Age	Relationship
		<i>Self</i>

