

Dependent Student Household Size Worksheet 2024-2025

First Name	Last Name	
Student ID #	Cell Phone	
Email Address		

Your Free Application for Federal Student Aid (FAFSA) was selected by the U.S. Department of Education for review in a process called "Verification". Verification must be completed before your financial aid can be finalized and before any aid can be credited to your student account. In order to verify the information you submitted on the FAFSA, please complete this form.

Pell eligible students must submit all required documents no later than 8/31/2025 or within 60 days after the last day of enrollment whichever is first. Loan eligible students must submit documents at least 30 days prior to the last day of class.

Family Information:

List below the people in your parent's household. Include the following individuals:

- 1. You
- 2. Your parent(s), read below for clarification:
 - a. If both legal (biological or adoptive) parents live together, regardless of marital status or gender, include both parents on the list.
 - b. If biological parents are divorced/separated, list custodial parent. If custodial parent has remarried, include your stepparent on the list. Also include all stepsiblings who meet the criteria listed below. *Do not include non-custodial parent's information.
- 3. Your parent's other children <u>if your parents will provide more than half of their support from July 1,</u> 2024, through June 30, 2025, or if the other children would be required to provide parental information if they were completing a FAFSA for 2024-2025.
- 4. Other people if they now live with your parents and your parents will provide more than half of their support from July 1, 2024 through June 30, 2025.

*If biological parents are divorced/separated, list the custodial parent. If custodial parent has remarried, please include stepparent and all stepsiblings who meet the criteria listed above.

LSUS Financial Aid

Full Name	Age	Relationship	Attending College at Least Half Time?	If Yes, List the Name of College or University
		Self		Louisiana State University Shreveport

By signing below, I (we) certify that all information provided on this form and any supporting documentation I have submitted is complete and correct to the best of my knowledge. I understand if I purposely give false or misleading information, I may be fined, sentenced to prison, and/or removed from school. Applications suspected to contain fraudulent information will not be awarded federal financial aid.

Student's Signature	Date
Parent's Signature	Date