

2017-2018 Verification of Household Members and/or Marital Status

Blue Ridge Community College

Instructions:

Complete this form and submit it to the Financial Aid Office as soon as possible, so that your financial aid won't be delayed. The Financial Aid Office can assist you if you have questions. **Incomplete forms will be returned unprocessed. If you do not know your Student ID number, instructions for looking it up can be found at <https://www.brcc.edu/services/computing/mybrcc-support/index.html#emplid>**

Last Name: _____ First Name: _____ Middle Initial: _____

Student ID: _____ Date of Birth (MM/DD/YY): _____ Phone Number w/Area code: _____

Household Members:

Total Number of people in your household: _____ Total Number of people in your household attending college in 2017-2018: _____

For the above question, indicate the number of people in your household, including;

- Yourself,
- For dependent students: Parents (even if you do not live with them) and any dependent siblings,
- For independent students: Spouse and any children or other dependents,
- Other people if they now live with your family, and your family provides more than half of their support and will continue to provide more than half of their support from July 1, 2017 through June 30, 2018.

Indicate the number of household members who will be attending college between July 1, 2017 and June 30, 2018. Only include family members who are attending at least half-time in a degree or certificate program. **Do not include your parents.**

Student Marital Status Verification:

Please indicate your marital status:

Single Married Divorced/Separated Widowed

Date of marital status: _____

Please indicate your tax filing status:

Single Married Filing Separately Married Filing Jointly Head of Household Will Not File

Parent Marital Status Verification:

Please indicate your parent's marital status:

Single Married Divorced/Separated Widowed

Date of marital status: _____

Please indicate your parent's tax filing status:

Single Married Filing Separately Married Filing Jointly Head of Household Will Not File

Signature:

By signing this worksheet, you certify that all the information is complete and correct. You must physically sign this form.

Student Signature: _____ Date Signed: ____/____/____

Parent Signature: _____ Date Signed: ____/____/____

Please return this form by fax to 540-234-8189, scanned e-mail attachment to finaid@brcc.edu, or mail to Blue Ridge Community College, Office of Financial Aid, Box 80, One College Lane, Weyers Cave, VA 24486. Please call 855-844-3631 if you have questions.