



## 2023–2024 Dependent Household Information Form

Your financial aid application was selected by the U.S. Department of Education to undergo a process called verification. You and your parent must complete, sign, and submit this form to the Financial Aid Office to continue the review process and determine your eligibility for federal student aid. **Incomplete forms or conflicting information will cause delays in the processing of your aid.** Instructions for looking up your student ID number are found here: [How to look up your student ID number](#).

### A. Student Information:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Student ID (required): \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

### B. Household Members and Number in College

Please list all of the people who will be in your parent’s household from July 1, 2023 to June 30, 2024. **This should be the same as the parental information provided on your FAFSA.**

Household members include the following:

- Yourself, even if you don’t live in their home.
- Your parent(s), including step-parent if your parent is remarried.
- Your sibling(s)/step-sibling(s) that are under 24 or if over 24 they receive more than half of their support from your parent(s).
- Other people that currently live with your parents, receive more than half of their support from your parents, and will continue to do so through June 30, 2024.

If anyone listed below, **other** than yourself and your parent(s)/step-parent, will be enrolled at a community college or university between July 1, 2023 and June 30, 2024, put the name of the college and whether they will be enrolled in 6 credits or more. If more space is needed attach an additional sheet with the student’s name and ID number at the top.

First Name	Last Name	Age	Relationship to You	College Name <i>*Don’t include parent’s if enrolled*</i>	Enrolled in 6 credits or more? Yes or No
EXAMPLE: Missy	Jones	18	Sister	XYZ University	Yes
			Self	Blue Ridge Community College	

### C. Certification and Signatures

Each person signing below certifies that all the information reported on this form is complete, correct, and any additional information is attached. The student and one parent **MUST** sign and date this form in blue or black ink. Note: Forms must be physically signed with a pen or drawn using the “fill and sign” option on the PDF. **TYPED SIGNATURES ARE NOT ACCEPTED.**

**WARNING:** If you purposely give false or misleading information on this worksheet you may be fined, sentenced to jail, or both.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Please return your completed form in one of the following ways: Electronic: Upload to To-Do list item in SIS, email to [brccfinancials@brcc.edu](mailto:brccfinancials@brcc.edu), or electronic upload at [DropSecure](#). Fax: 540-234-8189. Mail: Blue Ridge Community College, Office of Financial Aid, Box 80, One College Lane, Weyers Cave, VA 24486. If you have questions or need assistance, please call 540-453-2301.