

Financial Aid 141 College Drive, Albemarle, NC 28001 **Tel:** (704) 991-0302 **Fax:** (704) 991-0160 financialaid@stanly.edu

Form 1A 2024-2025 DEPENDENT VERIFICATION OF FAMILY SIZE

## SCC IS REQUIRED TO VERIFY YOUR FAMILY SIZE

Your record has been selected for verification by the Department of Education

Student Name: \_

ID Number: \_

## WHO TO INCLUDE IN YOUR HOUSEHOLD

Yourself	Your Parent(s)	Other Children of Your Parent(s)	Other Person
		than hair of their support from July 1, 2024, through June 30, 2025. - OR – IF they live with your parents (or live apart because of college	IF they now live with your parent(s) and your parent(s)
Enter on the first line	Even If You Don't Live with Your Parent(s) (Including Stepparent)		provide more than half of their support and will continue to provide more than half of their
	(Exclude parent who has died or is not living in household because of separation or divorce.)		support through June 30, 2025.

First and Last Name	Age	Relationship (to student)	
		Self	
If more space is needed, attach a separate page with the student's name and student ID number at the top			

The criteria for 'children' or 'other person' align with the family size requirement with whom the parent could claim as a dependent on a U.S. tax return at the time of completing the 2024-2025 FAFSA. Parents should not include any unborn children in the family size.

**The Stanly Community College Financial Aid Office is** <u>Required by the Federal Government</u> to verify your family size. *The SCC Financial Aid Office may require additional documentation if inconsistent or conflicting information is received.* For questions on <u>who is considered a parent</u> or for assistance please contact the SCC Financial Aid Office.

Acknowledgement: I certify that the above information is true and accurate to the best of my knowledge.

Student Signature