



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

Form 1A

2023-2024

DEPENDENT VERIFICATION OF HOUSEHOLD SIZE

SCC IS REQUIRED TO VERIFY YOUR HOUSEHOLD 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 People
		<p><u>IF</u> your parent(s) will provide more than half of their support from July 1, 2023, through June 30, 2024</p> <p align="center">- OR -</p> <p><u>IF</u> the child would be required to provide parental information if they were completing a FAFSA for 2023-2024.</p>	<p><u>IF</u> they now live with your parent(s) and your parent(s) provide more than half of their support and plan to provide more than half of their support through June 30, 2024.</p>
Enter on the first line	<p>(Including Stepparent)</p> <p><u>Even If You Don't Live With Your Parent(s)</u></p>		

First and Last Name	Age	Relationship (to student)	College (If Applicable)	Attending (At Least Half-time)
		<i>Self</i>	<i>Stanly Community College</i>	<i>Yes</i>

If more space is needed, attach a separate page with the student's name and student ID number at the top

The Stanly Community College Financial Aid Office is **Required by the Federal Government** to verify your household size. The SCC Financial Aid Office may require additional documentation if inconsistent or conflicting information is received. For questions on who is considered a parent 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.

 Parent Signature

 Date

 Student Signature

 Date

WARNING: If you purposely give false or misleading information, you may be fined, sentenced to prison, or both.