

2016-2017



Financial Aid

FORM 10 - FVERHI

Financial Aid Office

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Fresno, CA 93740-8026

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www.fresnostate.edu/studentaffairs/financialaid/

- INDEPENDENT STUDENT -
Household Members and Number In College

STUDENT ID LAST NAME FIRST NAME PHONE NUMBER (with area code)
PLEASE PRINT IN BLACK INK

At the start of the [ ] FALL 2016 [ ] SPRING 2017 Semester, student will be living:

[ ] With parent(s) [ ] On Campus [ ] Off Campus

List all the people in the household, and the requested information below: (See instructions on page 2)

Table with 7 columns: Full Name, Age, Born before 1/1/1993, CSUF Student ID# or Date of Birth, Relationship to Student, College name if attending at least 1/2 time in 2016-2017, Master's Level? Rows 1-10.

\*List additional household members on a separate sheet of paper.

\*\*NOTE: Additional documentation may be required if there is reason to believe information reported is inaccurate.

CERTIFICATION & SIGNATURE(S)

By signing this form, I (we) certify that all the information reported on it is complete and correct.

Student Signature

Date

Spouse Signature (if married)

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

**INSTRUCTIONS FOR HOUSEHOLD MEMBERS****Who do you list in the household?**

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- The student
- The student's spouse, if the student is married
- The student's or spouse's children if the student or spouse will provide more than half of the children's support from July 1, 2016 through June 30, 2017, even if a child does not live with the student.
- Other people if they now live with the student and the student or spouse provides more than half of the other person's support, and will continue to provide more than half of that person's support through June 30, 2017.

**INSTRUCTIONS FOR COMPLETING NUMBER IN COLLEGE**

On your FAFSA application, you were asked to identify the number of people attending college for the 2016-2017 aid year. The number in college should include any household member who:

- **Will be enrolled at least half-time at an eligible post-secondary education institution. Include the name of the college**
- **At any time between July 1, 2016 and June 30, 2017**
- **In a degree, diploma, or certificate program**

**NOTE:** We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible post-secondary educational institutions is inaccurate.