



Office of Financial Aid
 323 Erie Street, P.O. Box 5015, Port Huron, Michigan 48061-5015
 810-989-5530 fax 810-989-5774 sc4.edu

Student ID: _____
Rec'd by: _____
Date: _____

2025-2026 Independent Family Size Verification Worksheet

Your 2025–2026 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law states that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, the SC4 Financial Aid office will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet and submit the form to the Financial Aid Office. The Financial Aid Office may ask for additional information. Failure to submit the required forms within 60 days may result in your financial aid application being denied. If you have questions about verification, contact the Financial Aid Office as soon as possible so that your financial aid will not be delayed.

A. Independent Student's Information

Last Name _____ First Name _____ MI _____

Student's Social Security _____ Student Date of Birth _____

Street Address _____ City _____ State _____ Zip _____

Student's Phone _____ Student's Email _____

B. Independent Student's Family Information

Family size includes the following:

- Yourself
- Your spouse (if you are married)
- Your children, if any, if the following are true:
 - You will provide more than half of their support from July 1, 2025, through June 30, 2026, or
 - The child would be required to provide your information if they were completing a FAFSA for 2025-26.
 - Please include children who meet either of these standards, even if they do not live with you.
- Other persons if the following are true:
 - They now live with you
 - You provide more than half of their support, and
 - You will continue to provide more than half of their support through June 30, 2026.

The provided criteria for "dependent children" or "other persons" align with the requirement that family size align with whom the **student** could claim as a dependent on a U.S tax return if the student were to file a U.S. tax return at the time of completing the 2025-2026 FAFSA. As a result, the student should not include any unborn children in the family size. *If more space is needed, attach a separate page with the student's name and Student ID number at the top. Note: We may require additional documentation if we have reason to believe the information regarding household members is inaccurate.*

Full Name	Age	Relationship
<i>Missy Jones (example)</i>	<i>18</i>	<i>Sister</i>
		<i>Self</i>



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Student's Name: _____ SSN: _____

C. Certification and Signatures

I certify that all of the information reported on this worksheet is complete and accurate. The student must sign this worksheet. If married, the spouse's signature is optional.

Student's Signature _____ Date _____
Please print and sign this form

Spouse's Signature _____ Date _____
Please print and sign this form

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

**Submit this worksheet to the Financial Aid Office at SC4
financialaid@sc4.edu
You should make a copy of this worksheet for your records.**