ANOKA-RAMSEY COMMUNITY COLLEGE
CAMBRIDGE • COON RAPIDS

Financial Aid Office 300 Spirit River Dr. S Cambridge, MN 55008	OR	Financial Aid Office 11200 Mississippi Blvd. NW Coon Rapids, MN 55433

2014-2015 Household Size / Number in College Verification Worksheet

HS - NC

Your application was selected for review in a process called verification. In this process, Anoka-Ramsey Community College (ARCC) compares information from your FAFSA application with the information requested below. The federal law says we have the right to ask you for this information before awarding federal aid. If there are differences between your application information and your verification documents, ARCC may send corrections electronically to have your information reprocessed. You should complete verification as promptly as possible to avoid a delay in the processing of your financial aid.

A. Student Information

_____ _____
Last Name First Name MI ARCC Student ID

_____@my.anokaramsey.edu _____
ARCC Email Address Phone Number (including area code)

B. Family Information

Dependent (parent required on FAFSA):
List the people that your parent(s) will financially support between July 1, 2014 to June 30, 2015 – include:

- Yourself
- Your parent(s) (including stepparent)
- Other children your parent(s) provide primary financial support for. Include the other children who are completing a 14-15 FAFSA and are required to provide parental information, even if the children do not live with parents.
- Other people if they now live with and received more than half of their support from your parent(s) and will continue to receive more than half of their support from July 1, 2014 to June 30, 2015.

Independent Student (parent not required on FAFSA):
List the people that you / spouse will financially support between
July 1, 2014 to June 30, 2015 – include:

- Yourself
- Your spouse
- Your dependent children if you provide more than half of their support
- Other people if they now live with you and received more than half of their support from you/your spouse and will continue to receive more than half their support from July 1, 2014 to June 30, 2015.

If any of the people listed below (excluding the parents) will be attending college at least half-time (6 credits or more) in a degree, diploma, or certificate program between July 1, 2014 and June 30, 2015, please list the name of the college they are attending.

Family Information - List Full Name	Age	Relationship
1.		myself
2.		
3.		
4.		
5.		
6. (add'l use reverse side)		

List all family members (including self) attending college between 7/1/14 and 6/30/15 at least half-time and indicate which college:

_____
_____
_____

C. Sign this Worksheet

Each person signing this worksheet certifies that all the information reported on it is complete and correct. If asked by a school official, you agree to give proof of the information given on this form. For dependent students, both student and parent must sign.

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

_____ _____
Student Date Parent (required for dependent students) Date

 ARCC is an affirmative action, equal opportunity educator/employer. To receive this information in an alternate format, 763-433-1350