



California State University, Sacramento
Financial Aid Office, Lassen Hall 1006
6000 J Street, Sacramento, CA 95819-6044
Phone: (916) 278-6554
FAX: (916) 278-6082

Student Name: Jeffery Morse

Sac State ID #: 2 1 5 2 5 6 2 6 3

VERIFICATION OF HOUSEHOLD SIZE and NUMBER IN COLLEGE

You must clarify your household size and number in college.

Directions for Independent Students:

- List yourself (and your spouse, if applicable), **and**
- List your children, if you will provide more than half of their support from July 1, 2013 through June 30, 2014, even if the children do not live with the student, **and**
- List other members of household if they now live with you, you provide more than half of their support and will continue to provide more than half of their support from July 1, 2013 through June 30, 2014

Directions for Dependent Students:

- List **yourself** and your **parent(s)** (including step-parent) even if you don't live with your parents **and**,
- List your parents' other children, even if they don't live with your parent(s), if:
 - your parents will provide more than half of their support from July 1, 2013 through June 30, 2014, or
 - the children would be required to provide parental information when applying for financial aid for 2013-2014, **and**
- List other members of household if they now live with your parents and your parents provide more than half of their support, and will continue to provide more than half of their support from July 1, 2013 through June 30, 2014

Write the names of all household members as described above. Also, write in the name of the college for any household member, **excluding parent(s)**, who will be attending college at least half time between July 1, 2013 through June 30, 2014 and will be enrolled in a degree or certificate program. **Attach a separate sheet of paper if necessary.**

Full Name	Age	Relationship	Sac State ID number if siblings/spouse/Children attend Sac State	College/Undergraduate or Graduate
Example: Martha Jones	24	Self	123456789	Sac State/Undergraduate
Jeffery Morse	48	Self	215256263	Sac State /Under
Jeffery Morse II	24	son		

Note: We may require additional documentation if we need further clarification.

Certification Statement

I hereby certify that all information on this form is accurate and complete to the best of my knowledge.

Student Signature Jeffery Morse Date 3-28-13

Parent Signature _____ Date _____