



2020-21 DEPENDENT Verification (V1)

Return form to: Student Financial Services
 1825 N Bluemound Dr
 PO Box 2277
 Appleton, WI 54912-2277

Fax: 920-735-5763
 financialaid@fvtc.edu
 www.fvtc.edu/financialaid
 Phone: 920-735-5650

Your application was selected by the U.S. Dept. of Education for a process called verification. We must compare the information on your FAFSA with the information provided on this form. If there are differences between your FAFSA and the documents you've submitted, we will make corrections to your FAFSA or contact you for further clarification.

Student's Information:

Last Name	First Name	MI	FVTC Student ID Number
Date of Birth	Email Address	Phone Number	

Family Information:

Please list all members of your family, including:

- Yourself, even if you do not live with your parent(s)
- Your parent(s)/step-parent if they are living together, even if they are not married
 - Do not include a parent not living in the household due to separation or divorce
- Your parents' other children (only if your parents provide more than half of their support* from July 1, 2020 through June 30, 2021, or they would be required to give parental information when applying for 2020-21 federal aid).
 - **Do not include children for whom your parents are paying child support and do not include foster children**
- Other people, 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, 2020 through June 30, 2021.

*Support is defined as providing food, medical/dental care or health insurance, car insurance, money or other financial resources.

Note: You may be required to submit documentation proving you provide more than half of the support for those listed.

Full Name of Family Member Begin with yourself If you need more space, attach a separate sheet	Date of Birth	Relationship to Student Brother, sister, etc.	Full Name of College (if applicable) For you & any family member (except parent) who will be working toward degree completion at least half-time during the 2020-21 academic year.
		Self	Fox Valley Technical College
		Parent 1 on FAFSA	Not Applicable
		Parent 2 on FAFSA (if applicable)	Not Applicable

Certification Statement

By signing this verification form, I certify all the information reported is complete and accurate. **Parent signature is required.**

Signature of Student Date Signature of Parent on FAFSA Date

ELECTRONIC SIGNATURES NOT ACCEPTED