

2017-2018 Household Information for Independent Students

 Student Name (please print)

 CSUID

List the people you (and your spouse, if married) will support between July 1, 2017 and June 30, 2018. Include:

- 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, 2017 through June 30, 2018, even if the children do 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 people's support and will continue to provide more than half of their support through June 30, 2018.

Number in College: Please include in the space below information about any household member who is, or will be, enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2017 and June 30, 2018, include the name of the college.

If more space is needed, attach a separate page with the student's name and ID number at the top.

* Support includes money, gifts, loans, housing, food, clothes, car, medical/dental care, college payments, etc.

| NAME OF FAMILY MEMBER, INCLUDING YOURSELF | AGE | RELATIONSHIP TO YOU, THE STUDENT (ex. self, spouse, son, daughter, stepson, stepdaughter, etc.) | WILL THIS FAMILY MEMBER ATTEND COLLEGE AT LEAST HALF-TIME IN 2017-2018 IN A DEGREE OR CERTIFICATE PROGRAM? If yes, list college name below. If no, write N/A. |
|---|-----|--|--|
| | | Self | College Name: Colorado State University |
| | | | College Name: |
| | | | College Name: |
| | | | College Name: |
| | | | College Name: |
| | | | College Name: |

If more space is needed, attach another sheet or use the back of this form.

STUDENT AND SPOUSE SIGNATURES:

All information provided on this form is true and correct, and all fields are completed.

 Student's Signature

 Date

 Spouse's Signature (if applicable)

 Date