

Financial Aid Office 1801 East Cotati Avenue Rohnert Park, CA 94928

finaid@sonoma.edu sonoma.edu/finaid

Telephone: (707) 664-2389 Fax: (707) 664-4242

2020-21 Dependent Household Size Verification Form

Student Name				SSU I.D.	
nstructions:					
	st the members of your pa ur financial aid applicat		ehold. Report this	information for the parent(s) w	hose information
For this purpose, the	household includes:				
1) Yourself	AND 2) the parent(s) wh	ose informa	ation was provided o	on your financial aid application,	AND
will provide required to	e more than half of their s provide parental informat	upport from ion when a	n July 1, 2020 throu pplying for federal o	on your financial aid application igh June 30, 2021, or (b) the child or state financial aid. For anyone page 2 of this form; AND	ren would be
your parent	(s) provide — and will co	ntinue to pi	rovide — more than	n was provided on your financial half of their support through Junort on the Addendum on page 2	ne 30, 2021. For
				e, diploma, or certificate program obreviate) and write "Yes" in the	
If you need more spa	ice, list additional househouse	old member	rs on the Addendum	on page 2 of this form.	
	Name	Age	Relationship to You	Name of college, if attending 2020-2021	Attending at least half-time?
			SELF		
1 0		all the infor	mation reported on	it is complete and correct. The str	udent and at least

Date

Parent Signature

Phone number



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2020-21 Addendum to Dependent Household Size Verification Form

Student Name		SSU I.D.				
Instructions:						
Your parent(s) must explain their support of any of their children age 23 or older and of anyone who is not their child (regardless of age) in the space below. Include the date of birth for children who are currently age 23.						
Also, if you need additional space to list household members, use the space below. Be sure to include all information in the table from page 1 for each person.						
Sign this Statement Find person signing this form certifies that all the information reported on it is complete and correct. The student and at least						
Each person signing this form certifies that all the information reported on it is complete and correct. The student and at least one parent must sign and date this form.						
Student Signature	Date	Phone number				
Parent Signature	Date	Phone number				