Brightpoint
COMMUNITY COLLEGE

2023–2024 Dependent Household Size Verification Form

Your financial aid application was selected by the U.S. Department of Education to undergo a process called verification. You and your parent(s) must complete, sign, and submit this form listing the name and age of each of your parent(s)' household members and their relationship to you. The form must be submitted to the Financial Aid Office to continue the review process and determine your eligibility for federal student aid.

A. Student Information

_____   _____

Student's Name (Last, First, M.I.)   **Student ID - *REQUIRED***

B. Household Information

List the people in your <u>parent(s)' household</u>. Include the following:

- Yourself
- Your parent(s), including a stepparent, even if you do not live with your parent(s).
- Your parent(s)' other children if your parent(s) will provide more than half of their support from July 1, 2023, through June 30, 2024, or if the other children would be required to provide parental information if they were completing a 2023-2024 federal financial aid application. Include children who meet either of these descriptions, even if they do not live with your parent(s).
- Other people if they now live with your parent(s) **and** your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2024.

If more space is needed attach an additional sheet with the student's name and ID at the top. The student and parent must sign and date the additional sheet.

First Name	Last Name	Age	Relationship to You
EXAMPLE: Missy	*Jones*	*18*	*Sister*
			Self

C. Certification and Signatures

Each person signing below certifies that all the information reported on this worksheet is complete, correct, and any additional information is attached. The student and one parent MUST sign and date this section.
WARNING: If you purposely give false or misleading information on this worksheet you may be fined, sentenced to jail, or both.

_____   _____

Student's Signature   Date

_____   _____

Parent Signature   Date

Office of Financial Aid ~ 13101 Route 1, Chester VA 23831
Completed forms can be emailed to financialaid@brightpoint.edu,
faxed to 804-594-1630 or submitted in person by visiting the Financial Aid Office.
Please Note: Typed signatures are not accepted.
You must sign providing written signatures on documents before submission.