



**2008-2009 INDEPENDENT HOUSEHOLD VERIFICATION FORM
VALDOSTA STATE UNIVERSITY
OFFICE OF FINANCIAL AID**

Student's Name

Student ID Number

List in the chart below the family members for whom you did or will provide more than half of their support for the period 7-1-08 through 6-30-09.

- * List yourself, first; list spouse (if married)
- * List your dependent children (if you provide more than half of their support).
- * List other people if they meet **all three** of the following conditions:
 - 1) lived with you at the time you filed your FAFSA,
 - 2) received **more than half** of their support from you at that time, and
 - 3) continue to receive this support for the period 7-1-08 through 6-30-09.

Please list below the name(s), age(s) and relationship(s) of the members included in your household.

Name	Relationship	Name of College attending at least half time during 2008-2009	Age
_____	self	VSU	___
_____	_____	_____	___
_____	_____	_____	___
_____	_____	_____	___
_____	_____	_____	___
_____	_____	_____	___

Please list child support **received** in 2007 by any family member listed above. \$_____/yr

Please list child support **paid out** in 2007 by any family member listed above. \$_____/yr

Did you or your spouse serve on active duty in the military or work overseas during 2007? Yes___ No___

Student's Signature

Date

Return To: Office of Financial Aid
Valdosta State University
Valdosta, GA 311698

FAX: 229-333-5430