

Please return this form to: Louisiana Tech University Office of Financial Aid P.O. Box 7925 Ruston, LA 71272

## 2022-2023 Verification of Household Size/Number in College Independent Student

|  |  | •   |                                       |   |                    |
|--|--|---|---------------------------------------|---|--------------------|
| On the FAFSA you were asked to r   | eport th   | e number of people in                               | your household                        | and the number of t                             | hem who will       |
| be attending a postsecondary edu   | ıcation i  | nstitution at least half-                           | time between Ju                       | ıly 1, 2022 and June                            | 30, 2023, and      |
| will be enrolled in a degree, diplor   | ma, or ce  | ertificate program. On                              | your Verification                     | Worksheet the num                               | ber you listed     |
| for family members and/or memb   | ers attei  | nding college is conflict                           | ting. Since there                     | e is a discrepancy, we                          | e need you to      |
| complete the information below b   | y bringii  | ng these numbers up-to                              | o-date.                               |   |                    |
| Last Name: Tech CWID# or SSN:  |  |   |                                       |   |                    |
| First Name:  |  |   |                                       |   |                    |
| List the people in your household the through June 30, 2023 (include you Only include college if the person was 2023, and will be enrolled in a degree | ur spouse<br>vill be at                            | e). Include names, ages<br>tending college at least | , relationship, co<br>half-time betwe | llege, and college loc<br>en July 1, 2022 and J | cation.<br>une 30, |
| Full Name  | Full Name Age Relationship to Student College/City |   | llege/City                            | Will be<br>Enrolled at<br>Least 1/2time         |                    |
|  |  | Self  | Louisiana Tech University             |   |                    |
|  |  |   |                                       |   |                    |
|  |  |   |                                       |   |                    |
|  |  |   |                                       |   |                    |
|  |  |   |                                       |   |                    |
|  |  |   |                                       |   |                    |
|  |  |   |                                       |   |                    |
| Certification:   |  |   |                                       |   |                    |
| By signing this form, I(we) certify complete and correct. This verif   |  | •   |                                       |   | is                 |
| Student Signature:   |  |   | Date                                  |   |                    |
| Spouse Signature:  |  |   | Date                                  |   |                    |
| (optional)   |  |   |                                       |   |                    |