## **GW Verification Worksheet**

## INSTRUCTIONS

Your 2024-2025 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. Federal regulations indicate that before awarding Federal Student Aid, we must ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information we will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and at least one parent that signed the FAFSA (or your spouse in the case of independent students) must complete and sign this worksheet and submit the form with any other required documents to our office.

## **Verification of Family Size**

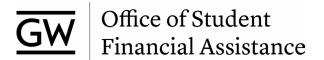
For Dependent Students list the people in your parent(s) household to include:

- Yourself
- Your parent(s) (including a stepparent) even if you do not live with them. Exclude a parent who is not living in the household because of separation of divorce.
- Your siblings if the following are true:
  - They live with the student's parents (or live apart because of college enrollment),
  - They receive more than half of their support from the student's parents from July 1, 2024, through June 30, 2025, and
  - They will continue to receive more than half their support from the student's parents during the award year.
- Other people if the following are true:
  - They live with the student's parents,
  - They receive more than half of their support from the student's parents, and
  - They will continue to receive more than half their support from the student's parents during the award year.

For Independent Students list the people in your household to include:

- Yourself
- Your spouse, if you are married.
- Your dependent children, if the following are true:
  - They live with you (or live apart because of college enrollment),
  - They receive more than half of their support from you from July 1, 2024, through June 30, 2025, and
  - They will continue to receive more than half their support from you during the award year.
- Other people if the following are true:
  - o They live with you,
  - They receive more than half of their support from you, and
  - They will continue to receive more than half their support from you during the award year

The 2024-2025 Verification of Family Member Enrollment form must be completed by the Financial Aid Office of the other school for each family member who is attending an undergraduate program at a school other than GW.



## 2024-2025 GW Verification Worksheet

| GW Student Last Name  | First             | Name                | MI GWid  |                             |
|---|-------------------|---------------------|--|-----------------------------|
|   |                   |                     |  |                             |
| Be sure to list ALL FAMILY N<br>separate page with the student  |                   |                     | t <b>those who are in school</b> . If more sp  | pace is needed, attach      |
| Include the name of the college   | e for anv househo | ld member. who v    | vill be enrolled, <u>at least half time</u> in a d   | degree, diploma, or         |
| certificate program at a postsed  | condary education | nal institution any | time between July 1, 2024, and June  | <b>30, 2025.</b> Parents of |
|   |                   |                     | counted as in school for the purposes<br>service academy or self-supporting s  |                             |
| Full Name   | Age               | Relationship        | College (if enrolled)  | Will be Enrolled a          |
|   |                   | Self                | George Washington University   |                             |
|   |                   |                     |  |                             |
|   |                   |                     |  |                             |
|   |                   |                     |  |                             |
|   |                   |                     |  |                             |
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|   |                   |                     |  |                             |
|   |                   |                     |  |                             |
|   |                   |                     |  |                             |
|   |                   |                     |  |                             |
|   | family membe      |                     | t form must be completed by the  |                             |
| fillication and orginati  | ui es             |                     |  |                             |
| ach person signing this worksheet certifies that all of the formation reported on it is complete and correct. he student and one parent that signed the FAFSA f the student is dependent) must sign and date below. |                   |                     | WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both. |                             |
| the student is dependent) mu  | ust sign and dat  | e pelow.            |  |                             |
| Student Signature   |                   |                     | Date   |                             |
| Parent / Student Spouse Signature   |                   |                     |  |                             |