

Anoka Technical College	Anoka-Ramsey Community College			
Financial Aid Office	Financial Aid Office OR	Financial Aid Office		
1355 West HWY 10	300 Spirit Dr. S	11200 Mississippi BLVD NW		
Anoka, MN 55303	Cambridge, MN 55008	Coon Rapids, MN 55433		
f <u>inaid@anokatech.edu</u>	financialaid@anokaramsey.edu			
Phone: 763-576-7730	Phone: 763-433-1500			
Fax: 763-576-7721	Fax: 763-433-1501			
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2023-2024 Household Size / Number in College Verification Worksheet

Your application was selected for review in a process called verification. In this process, the Financial Aid Office compares information from your FAFSA application with the information requested below. Federal law says we have the right to ask you for this information before awarding federal aid. If there are differences between your application information and your verification documents, the Financial Aid office may send corrections electronically to have your information reprocessed. You should complete verification as promptly as possible to avoid a delay in the processing of your financial aid.

A. Student Information

Last Name First Na	ame	MI	Student ID Number	
B. Family Information				
 Dependent Student (parent required on FAFSA): List the people that your parent(s) will financially substween July 1, 2023 to June 30, 2024-include: Yourself Your parent(s) (including step-parent) Other children your parent(s) provide prime support for. Include the other children who completing a 23-24 FAFSA and are require parental information, even if the children d the parents. Other people if they now live with and recent than half of their support from your parent(continue to receive more than half of their July 1, 2023 to June 30, 2024. (below on If any of the people listed below (excluding the parendegree, diploma, or certificate program between July 1. 	bet bary financial o are red to provide do not live with eived more (s) and will support from l left) rents) will be attend	 List the people that you/spouse will financially support between July 1, 2023 to June 30, 2024-include: Yourself Your spouse Your dependent children if you provide more than half of their support Other people if they now live with you and received more than half of their support from you/your spouse and will continue to receive more than half their support from July 1, 2023 to June 30, 2024. (below on left) ttending college at least half-time (6 credits of more) in a d June 30, 2024, please list the names of the college they 		
are attending. (below on the right) Family Information-List Full Name	Age Rela	tionship	Name of College	

Family Information-List Full Name	Age	Relationship	Name of College
		myself	

Each person signing this worksheet certifies that all the information reported on it is complete and correct. If asked by a school official, you agree to give proof of the information given on this form. **For dependent students, both student and parent must sign.**

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.