



# Lander University Financial Aid Office

22NHHC

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## 2021-2022 Number in Household and Number in College

**Student's Last Name** \_\_\_\_\_ **First** \_\_\_\_\_ **MI** \_\_\_\_\_ **Lander ID (L#)** \_\_\_\_\_

Your application for federal aid was selected for a review process called "verification." Please complete the information below.

### Instructions for whom to include in "Name of Household Members":

- If you were required to provide your parent's information on the FAFSA (most LU students are), include:**
  - Yourself and your parent(s) (must include stepparent) **NOTE:** To determine who is considered a parent for purposes of this form, refer to <http://studentaid.ed.gov/fafsa/filing-out>. **Grandparents, foster parents, legal guardians or those with legal custody are NOT considered parents (unless they legally adopted you) for FAFSA purposes and their information cannot be used.**
  - Your parent's other children if:
    - (a) your parents will provide **more than half of their support from 7-1-2021 through 6-30-2022 OR**
    - (b) the children **could answer "NO" to every dependency status question on the FAFSA**
  - Other people **if they now live with your parents** and your parents provide **more than half of their support, and will continue to provide more than half of their support from 7-1-2021 through 6-30-2022.** Additional documentation may be required.
- If you were NOT required to provide your parent's information on the FAFSA, include:**
  - Yourself and your spouse (if married),
  - Your children, if you will provide **more than half of their support from 7-1-2021 through 6-30-2022,**
  - Other people **if they now live with you** and you **provide more than half of their support, and will continue to provide more than half of their support from 7-1-2021 through 6-30-2022.** Additional documentation may be required.

(Check here \_\_\_ if more than 6 in the household and list additional family members on the back)

By signing this worksheet, I/We certify that all of the information reported is complete and accurate.

Number in Household			Full name of college if household member is, or will be, enrolled at least half-time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2021, and June 30, 2022. Parents of a dependent student aren't included.
Full Name	Age	Relationship	List Name of College
		Self	Lander University

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

\_\_\_\_\_  
**Student's Signature** (Required, digital signature not accepted)      **Phone #**      **Date**

\_\_\_\_\_  
**Parent's Signature** (Required, digital signature not accepted)      **Phone #**      **Date**

DATA ENTRY	Financial Aid Office Use Only	COUNSELOR REVIEW	
RRAAREQ	xxNHHC = N - Pending Review Insert CNSLV = N - Pending Review	Complete Verf Review form	
Initials/date		CNSLR Initials/date	
Fwd to Counselor date			