Your Free Application for Federal Student Aid (FAFSA) has been selected for verification and cannot be processed further until you complete this form and submit it to the Office of Financial Aid.

DEADLINES – Please visit www.winthrop.edu/finaid/verification for processing deadlines

PLEASE PRINT

STUDENT INFORMATION

Name ___________________________ Winthrop ID # ____________

HOUSEHOLD INFORMATION

NOTE – For financial aid purposes, information from grandparents, other family members or guardians is NOT acceptable.

List the people in your parents’ household, including:
• yourself and your parents (including stepparent), even if you don’t live with your parents, and
• your parents’ other children, even if they don’t live with your parent(s), if (a) your parents will provide more than half of their support* from July 1, 2015 through June 30, 2016, or (b) the children would be required to provide parental information when applying for Federal Student Aid, and
• 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 July 1, 2015 through June 30, 2016.

For those attending college at least half time during the 2015-2016 school year (excluding parents), provide the name of the college that person plans to attend. If a household member is unsure about attending college, do not list a college.

*Support includes money, gifts, loans, housing, food, clothes, car, medical and dental care, payment of college costs, etc.

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Age</th>
<th>Relationship</th>
<th>College</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Self</td>
<td>Winthrop University</td>
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NOTE – If the number of people listed above, or the number of people in college, has changed since you filed your FAFSA, please explain:

____________________________________________________________________________

____________________________________________________________________________

CONTINUED ON NEXT PAGE
**CHILD SUPPORT PAID**

Did your parent(s) **pay** child support in 2014?  Yes [ ] No [ ]

If yes, how much for the year?  $____________

List the name(s) and age of each child for whom child support was paid:

<table>
<thead>
<tr>
<th>Child’s Name</th>
<th>Child’s Age</th>
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</thead>
<tbody>
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</table>

**FOOD STAMPS**

In 2013 or 2014, did you, your parents or anyone in your parents’ household (listed on page 1) receive Food Stamps from the Supplemental Nutrition Assistance Program (SNAP)?

[ ] Yes  [ ] No

*Note: If Winthrop has reason to believe that the information regarding the receipt of SNAP benefits is inaccurate, Winthrop may require documentation from the agency that issued the SNAP benefits in 2013 or 2014.*

*By signing this worksheet, we certify that all of the information reported to qualify for Federal student aid is complete and correct.*

Student’s Signature ___________________________ Date 

Parent’s Signature ___________________________ Date 

Submit to Office of Financial Aid; Sykes House; 638 Oakland Ave; Rock Hill, SC 29733 or fax to (803) 323-2557