

**WINTHROP UNIVERSITY
OFFICE OF FINANCIAL AID**

**Verification Form
2019-2020**

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

Student's Name _____ Winthrop ID Number _____

Household Information - List below the people in your household for whom you will provide more than half their support¹ between July 1, 2019 and June 30, 2020. Make sure to include....

- Yourself (student)
- Your children, if you will provide **more than half their support¹** from July 1, 2019 through June 30, 2020.
- Other people, if you will provide **more than half their support¹** from July 1, 2019 through June 30, 2020.

Full Name	Age	Relationship	College ²
		Self	Winthrop University

If more than 6 family members, attach a separate sheet of paper with the additional information

¹Support includes money, gifts, loans, housing, food, clothes, car, medical and dental care, payment of college costs, etc.

²Write in the name of college for any household member who will be attending at least half-time between July 1, 2019 and June 30, 2020 as a **degree-seeking** student. If someone is unsure about attending college, leave it blank.

If the number of people listed above, or the number of people in college, has changed since you filed your FAFSA, please explain: _____

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

Spouse's Signature (optional)

Date