

**WINTHROP UNIVERSITY  
OFFICE OF FINANCIAL AID**

**Verification Form  
2020-2021**

**DEADLINES** – Please visit [www.winthrop.edu/financialaid/verification](http://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 support<sup>1</sup> between July 1, 2020 and June 30, 2021.** Make sure to include....

- Yourself (student)
- Your children, if you will provide **more than half their support<sup>1</sup>** from July 1, 2020 through June 30, 2021.
- Other people, if you will provide **more than half their support<sup>1</sup>** from July 1, 2020 through June 30, 2021.

Full Name	Age	Relationship	College <sup>2</sup>
		Self	Winthrop University

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

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

<sup>2</sup>Write in the name of college for any household member who will be attending at least half-time between July 1, 2020 and June 30, 2021 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