



## 2026-2027 VERIFICATION WORKSHEET - DEPENDENT STUDENT

Student Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_  
Last First MI

Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Street City State ZIP Code Home Number

Your application has been selected for review in a process called Verification. The Financial Aid Office must verify that the family size that you reported on the FAFSA is accurate. **Use the tables below to list the members of your parent's household.** If you need help determining who to list on this form, contact the Financial Aid Office.

### List yourself

FULL NAME	DATE OF BIRTH (mm-dd-yyyy)	COLLEGE
		UW-Whitewater

### List the parent(s) of record that you included as a contributor on the FAFSA<sup>1</sup>

FULL NAME	DATE OF BIRTH (mm-dd-yyyy)	RELATIONSHIP TO STUDENT

<sup>1</sup>If your biological parents live in the same household, list both, even if they are unmarried.

<sup>1</sup>If your parents are **divorced**, please provide information for the parent who provided more financial support during the 12 months immediately preceding the date you signed your FAFSA.

<sup>1</sup>If your divorced parent was **remarried** as of the date the FAFSA was filed, include your stepparent even if your parent and stepparent did not file joint tax returns in 2024.

### List other members of your parent(s) of record household<sup>2</sup>

FULL NAME	DATE OF BIRTH (mm-dd-yyyy)	RELATIONSHIP TO STUDENT

<sup>2</sup>List the other children of the parents listed on the FAFSA and above, even if they don't live with your parents, if (a) your parents will provide more than half of their support from July 1, 2026 through June 30, 2027, or (b) the children would be required to provide parental information when completing a 2026-2027 FAFSA.

<sup>2</sup>List other people if they now live with parent(s) listed on the FAFSA and above if your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2026 through June 30, 2027.

<sup>2</sup>If you need more space, you may write on the back of this form.

By signing this worksheet, we certify that all the information reported on it is complete and correct. If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both. **Note: We may request additional documentation if we have reason to believe any of the information on this form is inaccurate.**

\_\_\_\_\_  
Student Signature (typed signatures are not acceptable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature **At least one parent must sign** (typed signatures are not acceptable)

\_\_\_\_\_  
Date