



**Verification of Number in College
(2017 – 2018 Award Year)**

You indicated that more than one person in your household will be attending college in 2017-2018. Please complete the following information and return it to the Office of Financial Aid as soon as possible. Your financial aid file will not be complete until this information is received.

Student's Name: _____ **Student ID or SSN:** _____

Select Applicable Statement:

I am a dependent student.

Fill in the information about the people whom your parents will support during the **academic year July 1, 2017 to June 30, 2018** who will be attending college at least half time in a program. Include your parent's dependent children (if they will receive more than half of their support from your parents or if they would be required to provide parental information when applying for Federal Student Aid). Include other people only if they lived with and received more than half of their support from your parents at the time you completed your application and will continue to get this support between July 1, 2017 and June 30, 2018. (**Exclude your parents on this form.** To request that a parent be included in the number in College, you must contact Financial Aid for further instructions.)

I am an independent student.

Fill in the information about the people whom you will support during the **academic year July 1, 2017 through June 30, 2018** who will be attending college at least half time in a program. Include your spouse and your dependent children (if they will receive more than half of their support from you). Include other people only if they lived with and received more than half of their support from you (or your spouse) at the time you completed your application and will continue to get this support between July 1, 2016 and June 30, 2017.

Name of family member attending college in the 2017- 2018 academic year	Age	Relationship to You	College attending at least ½ time (6 credits) for at least 1 semester in a program for the 2017 – 2018 academic Year
		Self	MECC

Student's Signature

Date

Parent's Signature (if student is dependent)

Date