

## 2023–2024 Dependent Student Verification Worksheet

**Financial Aid Department**  
 800 Main Street, Room C-019  
 Pewaukee, WI 53072  
 262.691.5436 (Phone); 262.691.5123 (Fax)  
 money@wctc.edu

**Step 1: Student Information**

First name: \_\_\_\_\_ Last name: \_\_\_\_\_  
 Student ID: \_\_\_\_\_ Date of birth: \_\_\_\_\_

**Step 2: Student's Parent Information**

List your parent(s) below, **whose information you were required to provide on the FAFSA**, even if you do not live with them

- If the parent listed on your FAFSA has remarried, you must include your stepparent
- If your legal parents live in the same household, include both parents, even if they are divorced, separated, or never married

	Full name	Date of birth	Relationship to Student
Parent 1			
Parent 2			

**Step 3: Student's Parent Household Information**

**Read carefully** and list below:

- **Your parent(s)' other children** if your parent(s) will provide more than half of their support from July 1, 2023 through June 30, 2024 or if the children would be required to provide parental information when applying for Federal Student Aid, even if they don't live with your parent(s). Do not include foster children.
- **Other people** only if they live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide this support from July 1, 2023 through June 30, 2024.
- **Those in College:** If any of the people listed below will be attending college at least half-time (6 credits or more) in a degree, diploma, or certificate program between July 1, 2023 and June 30, 2024, please list the name of the college they are attending.

Full name	Date of birth	Relationship to Student	Name of College (if applicable)

\*List all household members as described above, even if those household members are not attending college. If you need more space, you may write on the back of this form.

**Step 4: Signatures** (Requires student signature and at least one parent signature)

By signing this worksheet, you and your parent(s) certify that all information reported to qualify for federal student aid is complete and correct. **Physical signatures are required; Typed signatures are not acceptable.**

**WARNING:** If you or your parent(s) give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

Student signature \_\_\_\_\_ Date \_\_\_\_\_  
 Parent signature \_\_\_\_\_ Date \_\_\_\_\_

**Submit completed form to:**  
**WCTC Financial Aid Department**  
 Enrollment Center, Room C-019  
 800 Main Street, Pewaukee, WI 53072 | 262.691.5123 (Fax) | money@wctc.edu

