



WICHITA AREA TECHNICAL COLLEGE

Household Size Worksheet 2016-2017

Student ID: W00 _____ Social Security #: _____ - _____ - _____
 First Name: _____ MI: _____ Last Name: _____
 Address: _____ Date of Birth: _____
 City/State/ZIP: _____ Phone: _____

Family Information

- **If you answered “yes” to any question in Step 3 of the FAFSA** — include yourself, your spouse if you have one, and your children or other dependents, if you will provide more than half their support from July 1, 2016, through June 30, 2017.
- **If you answered “no” to every question in Step 3** — include yourself; your parent(s) — including step-parents, even if you do not live with them; your parents’ other children, even if they don’t live with your parent(s), if (a) your parents will provide more than half of their support from July 1, 2016, through June 30, 2017, or (b) the children would be required to provide parental information when applying for federal student aid. Also write in the name of the college for any household member, except a parent, who will be attending college at least half time between July 1, 2016, and June 30, 2017. Attach a separate page if needed.

Number in College: Include below information about any household member, excluding the parents, who will be enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2016 and June 30, 2017, include the name of the college.

Full Name	Age	Relationship	Name of College Attending	Will be Enrolled at Least Half Time (Yes or No)
<i>Example: John Doe</i>	23	<i>Self</i>	<i>Wichita Area Technical College</i>	<i>Yes</i>

Note: We may require additional documentation if we have reason to believe that the information regarding the household member enrolled in eligible postsecondary educational institutions is inaccurate.

By signing this worksheet, I (we) certify that all of the information reported to qualify for Federal student aid is complete and correct. (If dependent, at least one parent must sign)

 Student signature Date Parent signature (if required) Date

Wichita Area Technical College
 Financial Aid
 4004 N. Webb Rd. Wichita, KS 67226
 316-677-9400

If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.