

WILLIAM PENN UNIVERSITY
2019-20 VERIFICATION OF
Number of Household Members and Number in College
Dependent Student

Information on your 2019-2020 FAFSA regarding the number of household members and/or the number in college has changed from the original FAFSA. Information may be changed if the original FAFSA information you provided was incorrect. If you have questions about verification, contact Ann Johnson at 800-779-7366 option 2 or 641-673-1184.

Send documentation by:
MAIL:
 William Penn University
 Office of Financial Aid
 201 Trueblood Avenue
 Oskaloosa , IA 52577

OR

FAX:
 641-673-1115

List below the people in the parent's household. Include:

- The student
- The parents (including a stepparent) even if the student doesn't live with the parents.
- The parent's other children if the parents will provide more than half of the children's support from July 1, 2019, through June 30, 2020 or if the other children would be required to provide parental information if they were completing a FAFSA for the 2019-2020. Include children who meet either of these standards, even if the children do not live with the parents.
- Other people if they now live with the parents and the parents provide more than half of the other person's support, and will continue to provide more than half of their support through June 30, 2020.

Number in College: Include in the space 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, 2019 and June 30, 2020, include the name of the college.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time (Yes or No)
		Self		

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

Certification and signature

The information on the original FAFSA was incorrect. Please make changes to reflect the above information. By signing this worksheet, I certify that all the information reported on this worksheet is complete and correct.

Warning: If you purposely give false or misleading information, you may be fined, be sentenced to jail, or both.

 Student's Name (Print Name)

 Date of Birth

 Student's Signature

 Date

 Parent's Signature

 Date