ΙH

Muskingum University 2022-2023 Verification Independent Student Household Size and Number in College

STUDENT NAME:	ID:		
Full Name List the name of each person you included in your household on the FAFSA. In order for them (yourself, spouse, children, etc.) to be included, they must receive at least half of their financial support from you between from 07/01/2022-06/30/2023	Age	Relationship	College* list the name of the college for each person who is or will be enrolled at least half time any time between 07/01/2022-06/30/2023
		Self	Muskingum University
		Spouse	
By signing below, you certify that all the informat	ion repo	rted is complete	and correct.
Student's Signature (electronic signatures will not be accepted)			Date

By FAX: 740-826-8196

Questions? 740-826-8139