IV18-H

Financial Aid Office Gavilan College 5055 Santa Teresa Blvd. Gilroy, CA 95020

Tel: 408-848-4727, 408-852-2812

Your 2018-19 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we must ask you to confirm the information you and your parents reported on your FAFSA. To verify that you provided correct information, the Financial Aid Office will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and at least one parent must complete and sign this worksheet, attach any required documents, and submit the forms to Gavilan.

1. I	ndependent Student	's Information					
Student's Last Name Student's First Name Stu		Studen	t's M.I.	Student's Gavilan ID			
Stude	ent's Street Address (inc	lude apt. no.)			Student's Social Security Number		
City State Zip		Zip Co	de	Student's Date of Birth			
2. L	ist people in your h	ousehold. This includes:			Telephone Number		
☑	Yourself.		☑	Your spo	use, if you are married.		
☑	support from July 1, 2013 would be required to pro completing a FAFSA for	you will provide more than half of the state of the state of the state of the parental information if they were wide parental information if they were 2018-2019. Include children who hey do not live with you	child ere	than half	ople if they now live with you and you provide more of their support and will continue to provide more of their support from July 1, 2018 through June 30,		

Include the name of the college for any household member who will be enrolled, <u>at least half time</u> in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2018, and June 30, 2019. *If more space is needed, attach a separate page with the student's name and Gavilan ID at the top.*

	Full Name of Person in		Relationship	College	If attending	
	Household (per definition above)		to Student		college, will	
					-	enroll at
					least ha	lf time?
1			Self	Gavilan College	□ Yes	□ No
2					□ Yes	□ No
3					□ Yes	□ No
4					□ Yes	□ No
5					□ Yes	□ No
6					□ Yes	□ No
7					□ Yes	□ No
8					□ Yes	□ No
9					□ Yes	□ No
10					□ Yes	□ No
11					□ Yes	□ No

IV18-H	Student's Name:	G00
3.	Certification and Signatures Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and one parent must sign and date.	WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.
	Student Signature:	Date: