

**Clarification of Household Information  
2023-2024**

Lakeland ID Number (LID) 

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Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

There is a discrepancy between the information you provided on your Free Application for Federal Student Aid (FAFSA) and Lakeland’s Verification Worksheet regarding your household size and/or household members in college. Please complete the following to clarify your household information for the 2022-2023 financial aid year.

**Independent Students – Include the following information on:**

- Yourself (and spouse, if married)
- Your children, if you will provide more than half of their support between July 1, 2023 and June 30, 2024 even if they do not live with you
- Other people, if they now live with you, you provide more than half of their support and you will continue to provide more than half of their support between July 1, 2023 and June 30, 2024

**Dependent Students – Include the following information on:**

- Yourself
- Your parent(s) whose information is on your FAFSA (including a stepparent) even if you don’t live with 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 even if they do not live with your parent(s) or if the other children would be required to provide parental information if they were completing a FAFSA for 2023-2024
- Other people, if they now live with your parent(s), your parent(s) provide more than half of their support and your parent(s) will continue to provide more than half of their support through June 30, 2024

Independent Students: List yourself, your spouse and children, if applicable. Dependent Students: List yourself, parent(s) and siblings.			
Name	Age	Relationship to student	If enrolled in college at least half-time in 2023-2024, include the name of the college, otherwise leave blank
		Self	Lakeland Community College

Others in your household: Provide the following information for others in your household if you (and your spouse), or your parent(s) are providing more than 50% of their support.					
Name	Age	Relationship to student	If enrolled in college at least half-time in 2023-2024, include the name of the college, otherwise leave blank	Dates this person will live with you between July 1, 2023 and June 30, 2024	List all resources you, your spouse or your parent(s) will use to support this person

By signing this form, I/we certify that all information reported on this worksheet is complete and correct. If dependent, at least one parent must sign this form. **Warning: Purposely providing false or misleading information on this form is punishable by fine and/or imprisonment.**

Student’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent’s Signature (for Dependent Students): \_\_\_\_\_ Date: \_\_\_\_\_

**Complete this form and return:\***

- By Fax:** 440.525.7704
- By Mail:** Lakeland Community College • 7700 Clocktower Drive • Kirtland, OH 44094-5198
- By [Secure Upload](https://lakelandcc.edu/financialaid):** Visit [lakelandcc.edu/financialaid](https://lakelandcc.edu/financialaid) • Under RelatedLINKS (right side of page), select Financial Aid Documents Secure Upload link
- In Person:** Lakeland Student Service Center • located in Building A-1003

*\*Please do not send documents through email as it is not secure.*