



3505 Arendell Street, Morehead City, NC 28557 ♦ (252) 222-6000 ♦ Carteret Community College

**Number of Household Members and Number in College
2023-2024**

Student Name: _____ **Student ID#** _____

STEP 1:

- Independent Students:** List the people in your household. Include: yourself, your spouse (if applicable), your children (if you will provide more than half of their support from July 1, 2023 through June 30, 2024), and other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support between July 1, 2023 and June 30, 2024.
- Dependent Students:** List the people in your parents' household (**even if you don't live with your parents**). Include: yourself, your parent(s) (include stepparent), your parents' other children (**if your parents provide more than half of their support from July 1, 2023 through June 30, 2024, or the children would be required to provide parental information when applying for Federal Student Aid**), and other people if they now live with your parents, and your parents provide more than half of their support and will continue to provide more than half of their support between July 1, 2023 and June 30, 2024.

STEP 2:

Write the names of all household members as defined above. Also write in the name of the college for any household member, **excluding your parent(s)**, who will be attending college at least half-time between July 1, 2023 and June 30, 2024, and will be enrolled in a degree, diploma, or certificate program. If you need more space, attach a separate page with the student's name and Social Security or Student ID number at the top.

Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time
<i>Missy Jones (example)</i>	<i>18</i>	<i>Sister</i>	<i>Central University</i>	<i>Yes</i>
		<i>Self</i>		

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

Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student, and one parent, if parent information was reported on the FAFSA, must sign and date.

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

Print Students Name: _____ Student ID# _____

Student's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

An Equal Opportunity Educational Institution Serving the Community without regard to Race, Creed, Sex, National Origin, or Disability