

**2026-2027  
PARENT FAMILY SIZE VERIFICATION FORM****Student Information**

STUDENT NAME (LAST, FIRST, MIDDLE INITIAL)	SSN OR STUDENT ID	DATE OF BIRTH
--	-------------------	---------------

**Instructions for Dependent Students**

We are conducting a verification of the number of people you reported in your or your parent(s) household. Federal law states that we have the right to ask you for this information before awarding federal aid. If there are differences between your application information and this document, our office may need to make corrections to your FAFSA.

In order to avoid delaying your financial aid determination, this completed verification form should be submitted as soon as possible.

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

- Yourself, even if you do not live with your parent(s)/stepparent.
- Your parent(s)/stepparent.
- Your parent(s)'/stepparent's other children, if they will receive more than half of their support from your parent(s)/stepparent from July 1, 2026, through June 30, 2027. Do not include unborn children.
- Other people if they now live with your parent(s)/stepparent and they receive more than half of their support from your parent(s)/stepparent and will continue to do so from July 1, 2026, through June 30, 2027. (Please complete the Other Member of Household Verification Form for other people listed on this form.) You may be asked to provide additional documentation. The form can be found at [www.llcc.edu/financial-aid-forms](http://www.llcc.edu/financial-aid-forms).

**Household Information**

NAME	AGE	RELATIONSHIP
		SELF

**Certification and Signatures**

By signing this form, I certify that all the information reported on this form is complete and correct.

**WARNING: If you purposely give false or misleading information on this form, you may be fined and/or sentenced to jail.**

STUDENT SIGNATURE (REQUIRED – Sign printed form.)	DATE
PARENT SIGNATURE (REQUIRED – Sign printed form.)	DATE

Questions about how to complete this form?

Call 217-786-2237 or  
800-727-4161.

Text 217-786-2237.  
[www.llcc.edu/financial-aid](http://www.llcc.edu/financial-aid)

Return completed form to:

LLCC Financial Aid  
5250 Shepherd Road  
Springfield, IL 62703

[financial.aid@llcc.edu](mailto:financial.aid@llcc.edu)  
Electronic forms only accepted  
from LLCC email addresses.

217-786-2229 fax