

NORTH GEORGIA COLLEGE & STATE UNIVERSITY

OFFICE OF STUDENT FINANCIAL AID (OSFA)

DAHLONEGA, GA 30597

Phone: (706) 864-1412 Fax: (706) 864-1411 finaid@ngcsu.edu

Website: www.ngcsu.edu

**Certification of Household Size and/or Number in College
Dependent 2009 - 2010**

Student Name: _____ Student ID#: _____

Please complete the information below to include the people your parent(s) will support between July 1, 2009 and June 30, 2010. **Always include your parent(s), stepparent, yourself and your parent(s) other dependent children.** Include other people only if they now live with and received more than half of their support from your parent(s), and will continue to receive this support between July 1, 2009 and June 30, 2010. You will also need to list the college each person will be attending between July 1, 2009 and June 30, 2010. **Always** count yourself as a college student, **do not** include parents. Include others only if they will be attending at least half time in 2009-10 and will be in a college degree/certification program. Incomplete or unsigned forms **will** be returned to you and will cause a delay in the verification process. If you have any questions, contact this office.

	Full Name of Family Members	Age	Relationship to Student Applicant	College
1)	_____	_____	_____	_____
2)	_____	_____	_____	_____
3)	_____	_____	_____	_____
4)	_____	_____	_____	_____
5)	_____	_____	_____	_____
6)	_____	_____	_____	_____

If you need additional space, please attach a separate page.

Student Signature _____ Parent Signature _____

Completed forms must be returned to address above or may be brought in to the office, Price Memorial, RM 104, to continue the financial aid process.