



Financial Aid Office
1100 E. 14th St.
Ada, OK 74820
Phone: 580-559-5243
Fax: 580-559-5638

2024-2025 HOUSEHOLD SIZE VERIFICATION

Name _____

ECU ID# _____

YOU HAVE PROVIDED INCONSISTENT INFORMATION CONCERNING YOUR HOUSEHOLD SIZE. BEFORE WE CAN PROCESS YOUR 2023-2024 FINANCIAL AID APPLICATION YOU MUST SUBMIT THE FOLLOWING:

If you applied as a **DEPENDENT STUDENT**-give the number of people that your parents will support between July 1, 2024 and June 30, 2025. Include your parents and yourself. Include your parent's other children if they get more than half their support from your parents. Also include them if they would be required to provide parental information when applying for Federal student aid for the 2024-2025 school year. Include other people only if they now live with and get more than half of their support from your parents and will continue to get this support between July 1, 2024 and June 30, 2025. Do NOT include foster children.

If you applied as an **INDEPENDENT STUDENT**-give the number of people that you will support between July 1, 2024 and June 30, 2025. Include yourself and your spouse. Include your children if they get more than half of their support from you. Include other people **only** if they now live with you, **and** they now get more than half of their support from you, and they will continue to get this support between July 1, 2024 and June 30, 2025. Do NOT include foster children.

| Name | Age | Relationship to student | If this person will attend college ½ time, list college here: |
|-------------|-------|-------------------------|---|
| SELF | | | |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Check if there are more members and list these people on added page.

Student Signature

Date

Parent Signature (Dependent Students Only)

Date