According to federal requirements, we must verify the number of people in your household. Please complete and return this form to the financial aid office.

_________________________  _________________________
Student’s Printed Name      Student’s ID Number

HOUSEHOLD INFORMATION: List the people in your household below (whether or not they will attend college). The people in your household include:

- Yourself.
- Your spouse, if you are married.
- Your children, if any, if you will provide more than half of their support from July 1, 2020, through June 30, 2021.
- 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 through June 30, 2021.

For any household member who will be enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution at any time between July 1, 2020, and June 30, 2021, include the name of the college. If more space is needed provide a separate page with the student’s name and ID number at the top.

<table>
<thead>
<tr>
<th>FULL NAME</th>
<th>AGE</th>
<th>RELATIONSHIP</th>
<th>COLLEGE</th>
<th>Will be Enrolled at Least Half Time (Yes or No)</th>
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Certification and Signatures

By signing this worksheet you certify that all the information reported on it is complete and correct. This worksheet must be signed by the student.

_________________________  _________________________
Student Signature          Date

Please return completed form via postal mail, email, or fax using the contact information below.

Financial Aid Office
6740 Alexander Bell Drive, Suite 180
Columbia, MD 21046

Email: soe.finaid@jhu.edu
Phone: 410-516-9808
Fax: 410-516-9799