



**SOUTHWESTERN OREGON COMMUNITY COLLEGE
FINANCIAL AID OFFICE**

WMARK ♦ COOS BAY OR 97420-2912 ♦ (541) 888-7337 ♦ 1-800-962-2838 ext. 7337
www.socc.edu/serv_resrc/faweb2

**HOUSEHOLD INFORMATION FOR 2009-2010
INDEPENDENT STUDENT**

Student's Name _____ Student ID Number _____

How many people are in your (and your spouse's) household? _____

- Include yourself (and your spouse, if you have one).
- Include your children, if you will provide more than half of their support from July 1, 2009 through June 30, 2010.
- Include other people who live with you if you will provide more than half of their support from July 1, 2009 through June 30, 2010.*

How many of the above number will be attending college between July 1, 2009 & June 30, 2010? _____

- Include yourself.
- Include those who will be attending college at least half-time in 2009-2010 and pursuing a degree for at least one term/quarter/semester.

LIST ALL MEMBERS OF THE HOUSEHOLD STATED ABOVE:

Name	Age	Relationship	College/School
Student:		Self	

Student's Signature: _____	Date: _____
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* To qualify for this, the student must provide more than half of each person's support. Do not change the household number if there has been a change in marital status (see a Financial Aid Representative for further information).