



**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](http://www.socc.edu/serv_resrc/faweb2)

**HOUSEHOLD INFORMATION FOR 2008-2009  
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, 2008 through June 30, 2009.
- Include other people who live with you if you will provide more than half of their support from July 1, 2008 through June 30, 2009.\*

**How many of the above number will be attending college between July 1, 2008 & June 30, 2009?** \_\_\_\_\_

- Include yourself.
- Include those who will be attending college at least half-time in 2008-2009 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).