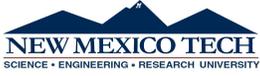


Student ID (900#)

Last Name

First Name



## 2024-2025 HOUSEHOLD VERIFICATION FORM FOR INDEPENDENT STUDENT

List below the people you will support between July 1, 2024 and June 30, 2025. Include:

- Yourself,
- Your spouse (if married),
- Your children if you provide more than half of their support.
- Include other people only if they meet the following criteria: (1) they now live with you, AND (2) you provide more than half of their support and will continue to provide more than half their support from July 1, 2024 through June 30, 2025.

**ALL FIELDS ARE REQUIRED**

FULL NAME	AGE	RELATIONSHIP TO STUDENT
		SELF

**TOTAL IN HOUSEHOLD:** \_\_\_\_\_

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARENT SIGNATURE

\_\_\_\_\_  
DATE

Complete and sign this form, then submit it to our office in person (Fidel Building Room 222), via email at [financial\\_aid@nmt.edu](mailto:financial_aid@nmt.edu) or by fax at 575-835-6519.