To submit the completed form: In person: Office of Financial Aid, Burgin-Dossett – Room 105; Mail: Office of Financial Aid, P.O. 70722, Johnson City, TN 37614; Fax: (423) 439-5855; Email: finaid@etsu.edu

2016–2017 Other Child Household Size Conflict – Independent Student (EHHSOC)

Student Name: ___________________________  Student ID: ___________________________

Complete this form if one or more of the children listed in your household size are not your legal, biological child(ren) or step-child(ren) such as a niece or nephew. If you have legal custody of a child that is not your biological or step-child(ren), please submit the official documentation of the custody order.

Check the box that applies to the other child(ren) whose information was reported on the Verification Worksheet:

☐ The student listed at the top of this form has NOT provided and will NOT provide more than 50% of ___________________________’s support from July 1, 2016 through June 30, 2017 (the 2016-2017 school year).

☐ The student listed at the top of this form has provided and will continue to provide more than 50% of ___________________________’s support from July 1, 2016 through June 30, 2017 (the 2016-2017 school year).

Certification: ALL PARTIES MUST COMPLETE THE CERTIFICATION BELOW

By signing this worksheet, I certify that all the information reported is complete and correct. I understand if I purposely give false or misleading information on this worksheet that I may be fined, sentenced to jail or both.

_________________________ (Student)  Date  

_________________________ (Parent of Other Child’s Printed Name)  Date  

_________________________ (Parent of Other Child’s Signature)  Date  