



Financial Aid and Scholarships

SOUTHEASTERN LOUISIANA UNIVERSITY

2023 – 2024 INDEPENDENT STUDENT HOUSEHOLD STATEMENT

Student's Name: _____

W#: _____

List the people in your household. Include the following:

- Yourself and your spouse, if you are married.
 - Do not include spouse if you are separated
- Your children, if you will provide more than half of their total financial support from July 1, 2023, through June 30, 2024.
- Unborn children that are due before June 30, 2024.
 - A letter from a physician on letterhead is required with the unborn child's due date. If documentation is not provided, the unborn child will be removed from the household.
- 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, 2024.

Full Name	Age	Relationship to Student	College	Enrolled at Least Half-Time (Yes or No)
		Self	Southeastern LA Univ.	

Certification and Signatures

I certify that all of the information reported on this worksheet is complete and correct. The student must sign and date this worksheet. If married, the spouse's signature is optional. **Warning:** If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student's Signature

Date

Spouse's Signature (as applicable)

Date