

2024 – 2025 Other Adult Household Size Conflict – Independent Student

Student Name: _____ ETSU E-Number: E _____

Complete this form if one or more of the individuals listed in your household size would be considered independent for financial aid purposes such as a parent or grandparent. DO NOT EMAIL documents with Personally Identifiable Information (PII) (i.e. SSN, Full Name, Phone #, Address...).

Check the box that applies to the student *whose information was reported on the FAFSA and the other adult(s) 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, 2024 through June 30, 2025 (the 2024-2025 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, 2024 through June 30, 2025 (the 2024-2025 school year).

Attached is proof of _____'s 2022 income (**tax return transcript, W-2 forms, 1099-MISC forms, SSA-1099 form, etc.**)

_____ was not employed in 2022 and had no source of income including Social Security Benefits.

Certification: STUDENT 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 Signature (Required)

Date

Failure to complete every section of this form will result in a delayed financial aid package

To submit the completed form: In person: Office of Financial Aid, Bldg 7 Room 216; Mail: Office of Financial Aid, P.O. 70414 Johnson City, TN 37614; Fax: (423) 439-6320;