

**2018 - 2019**  
**Cochise College**  
**Number of Household Members and**  
**Number in College**

**A. Student's Information**

Student's Last Name	Student's First Name	Student's M.I.	Student's C- Number
Student's Street Address (include apt. no.)			Student's Date of Birth
City	State	Zip Code	Student's Email Address
Student's Home Phone Number (include area code)			Student's Alternate or Cell Phone Number

**B. Family Information** – List ALL the people in your household, including their names and ages. Also write in the name of the college for any family member, excluding your parent(s), who will be attending college at least half-time between July 1, 2018 and June 30, 2019, and will be enrolled in a degree, diploma, or certificate program. **If you need more space, attach a separate page.**

Full Name	AGE	Relationship	Name of college attending in 2018-2019 (At least Half-time) <b>DO NOT INCLUDE PARENTS.</b>
		SELF	Cochise College

**DEPENDENT STUDENT**

- Yourself
- Your parents(s) (including stepparent)
- Your parents(s) other dependent children if (a) your parent(s) will provide more than half of their support from July 1, 2018 through June 30, 2019, or (b) the children would be required to provide parental information when applying for Federal Student Aid

**INDEPENDENT STUDENT**

- Yourself
- Your spouse (if you are married)
- Your and/or your spouse's children if you will provide more than half of their support from July 1, 2018 through June 30, 2019. Other people only if they live in your household and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2018 through June 30, 2019

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_