



# 2025-2026 Household Form

This form cannot be faxed or emailed.

Return this form to the address below.  
**Labette Community College**  
Financial Aid  
200 South 14<sup>th</sup>  
Parsons, KS 67357

Student's Name

Student ID

## Household Listing (attach a separate page if necessary)

**If you are a Dependent Student:** List below the people in the parents' household. Include:

- The student.
- The parents (including a stepparent) even if the student doesn't live with the parents.
- The parents' other children if the parents will provide more than half of the children's support from July 1, 2025, through June 30, 2026, or if the other children would be required to provide parental information if they were completing a FAFSA for 2025–2026. Include children who meet either of these standards, even if a child does not live with the parents.
- Other people if they now live with the parents and the parents provide more than half of the other person's support, and will continue to provide more than half of that person's support through June 30, 2026.

**If you are an Independent Student:** List below the people in the student's household. Include:

- The student.
- The student's spouse, if the student is married.
- The student's or spouse's children if the student or spouse will provide more than half of the children's support from July 1, 2025, through June 30, 2026, even if a child does not live with the student.
- Other people if they now live with the student and the student or spouse provides more than half of the other person's support, and will continue to provide more than half of that person's support through June 30, 2026.

**Number in College:** Include in the table below information about any household member who is, or will be, enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2025, and June 30, 2026, and include the name of the college. If more space is needed, provide a separate page with the student's name and ID number at the top

- ☐ The provided criteria for “dependent children” or “other persons” mirror the requirement that family size align with those the parent could claim as a dependent on a U.S. tax return if the parent were to file a U.S tax return at the time of completing the 2025-2026 FAFSA. As a result, the parent should not include any unborn children in the family size.

Full Name	Age	Relationship	Currently Attending College?	Will be Enrolled at Least Half Time July 1, 2025 through June 30, 2026
Missy Jones (example)	18	Sister	Central University	Yes
		Student	Labette Community College	

Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

## Certification Statement

By signing below I certify that:

- If I withdraw from class or reduce my course load, I must notify the Financial Aid Office. I also understand that my aid may be REDUCED OR CANCELED and I may be responsible for repaying any federal funds which I received before withdrawing from courses.
- I understand that my aid will be disbursed based on my certified enrollment status and may be different from my award letter. Withdraws or hours enrolled in at the time the award letter was written will not be considered to determine final aid disbursement.
- I understand and will use any federal funds received under the Title IV financial aid programs or Federal Student Loans this award year solely for expenses related to my attendance at Labette Community College.
- I understand that to be eligible for and to receive Federal Student Aid, I must be in a degree-seeking program at Labette Community College and only coursework directly applicable to my declared major at LCC is eligible for Federal Student Aid.
- I have read and will comply with the information included in the LCC Student Rights and Responsibilities.

**Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.**

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Print Student's Name

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Student's ID Number

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Student's Signature

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Date

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Parent's Signature

*(Dependent Students Only)*

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Date

**WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.**