

Your 2025-2026 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information, we will compare your FAFSA with the information on this institutional verification document and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this institutional verification document, attach any required documents, and submit the form and other required documents to us. We may ask for additional information. If you have questions about verification, contact us as soon as possible so that your financial aid will not be delayed.

A. Student Information (Please print clearly)

Last Name	First Name	M.I.	ACC Student ID or Social Security Number
Address (include apartment number)			Date of Birth
City	State	Zip Code	Phone Number (include area code)

B. Family Information

List the people in your family, and include:

- Yourself and your spouse (if applicable), and
- Your dependent children* if they live with you or live apart due to a period of temporary absence (e.g., college enrollment), and parent provides and will continue to provide **more than half of their support** from July 1, 2025 through June 30, 2026.
- Other persons* 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 from July 1, 2025 through June 30, 2026.

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

Write the names, ages and relationship of ALL family members in the spaces below.

In the last column, write in the full name of the college for any listed family member who will be attending college at least half-time between July 1, 2025 through June 30, 2026 and will be enrolled in a degree or certificate program as a regular student (do not designate a college if the person is early college or dual enrolled). If you need more space, attach a separate page or use back of form.

Full Name	Age	Relationship to the student	List College, if attending between 7/1/25 & 6/30/26
		Self	Alpena Community College

C. Certification and Signature

Each person signing below certifies that all of the information reported is complete and correct.

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

X

 Student Signature Date

X

 Contributor Spouse Signature Date