Return to: Rowan-Cabarrus Community College Financial Aid Office
1531 Trinity Church Rd. Concord, NC 28027
Submit online at: www.rccc.edu/fa-support-docs
EMAIL: fin.aid@rccc.edu

2026-2027 Financial Aid Verification Worksheet

You have been sent this form because your application was selected for review as part of the verification process**.** Before awarding any federal aid, this process must be completed.

STUDENT INFORMATION

Last Name | First Name | Rowan-Cabarrus Student ID # | Date of Birth

Phone # (Include Area Code) | Email Address

HOUSEHOLD INFORMATION

Dependent students are required to include parent information on the FAFSA.

If you are a dependent student, include:

- Yourself
- Your parent(s) used on FAFSA (include step-parent)
- Your parent(s) other dependent children if:
  your parent(s) will provide more than half of their support from July 1, 2026 through June 30, 2027, or the children would be required to provide parental information if filing a FAFSA
- Other people, only if they now live in your parents' household, and your parents will provide more than half of their support from July 1, 2026 through June 30, 2027

If you are an independent student, include:

- Yourself
- Your spouse (if you are married)
- Your children, if you will provide more than half of their support from July 1, 2026 through June 30, 2027
- Other people, only if they live in your household and you provide more than half of their support and will continue to do so from July 1, 2026 through June 30, 2027

Full Name	Age	Relationship	Name of College and Degree Program (If at least half-time student for 2026-2027)
		Self	RCCC/

CERTIFICATION:

By signing this worksheet, I certify all 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.

Student Signature | Student Name (Please Print) | Date

Parent Signature (If student is dependent) | Parent Name (Please Print) | Date