SUNY Delhi

Student Financial Services Telephone: 607-746-4570 Website: www.delhi.edu/sfs Appointments: www.delhi.edu/sfsconnect Secure Upload: www.delhi.edu/finaid-upload

SUNY Delhi Student ID									
8	0	0							

2023-2024 **EOP Household Verification Form**

We have reviewed the documentation that you have previously submitted and we are now requesting additional information. Please be sure to complete this form and submit to our office for review. The information you provide will be used to review your financial eligibility for the Educational Opportunity Program (EOP) at SUNY Delhi. Please provide as much information as possible.

SECTION 1 – STUDENT INFORMATION

Name:

Address:

Phone Number:

Email Address: Date of Birth:

SECTION 2 – HOUSEHOLD INFORMATION

DEPENDENT STUDENTS	INDEPENDENT STUDENTS			
List below the people in your parents' household. Include:	List below the people in your household. Include:			
• Yourself (the student).	• Yourself (the student).			
• The parent(s) with whom you live.	Your spouse, if married.			
• Your stepparent (if applicable).	• Your children (if any) if you will provide half of their support between			
• Their other dependent children (even if they do not live with you) if your	July 1, 2023 and June 30, 2024, even if they do not live with you.			
parent(s) will provide more than half of their support between July 1, 2023 and June 30, 2024.	 Other people if they now live with you, you provide more than half of their support and you will continue to provide more than half of their 			
• Other people if they now live with you, your parent(s) provide more than	support between July 1, 2023 and June 30, 2024.			
half their support, and your parent(s) will continue to provide more than	If more space is needed, attach a separate page			
half their support between July 1, 2023 and June 30, 2024.				
If more space is needed, attach a separate page.				

Name	Age	Relationship	Did you work in 2021?	Wages and tips earned in 2021	Filed a 2021 Federal Tax Return?	Dependent on the same income that supports you?
1.		Self	□Yes □No	\$	□Yes □No	🛛 Yes 🗆 No
2.			□Yes □No	\$	□Yes □No	□Yes □No
3.			□Yes □No	\$	□Yes □No	□Yes □No
4.			□Yes □No	\$	□Yes □No	□Yes □No
5.			□Yes □No	\$	□Yes □No	□Yes □No
6.			□Yes □No	\$	□Yes □No	□Yes □No
7.			□Yes □No	\$	□Yes □No	□Yes □No

SECTION 3 – CERTIFICATION AND SIGNATURES

NOTE: You may be asked to submit additional documentation. By signing this form, I/we certify that all the information reported on this form is complete and correct. Electronic signatures are NOT acceptable.

SUNY Delhi · Student Financial Services · 454 Delhi Drive, Delhi, NY 13753

Student Signature:

Date:

Parent Signature: ________(if student is a dependent)

Date: _____