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2018-2019 Household Independent Form

Student Name:		ID#_	Phone#	
List the names of all household me individuals for whom you will provwrite in the name of the college fobetween July 1, 2018 thru June 30,	ide more tha r any househ	n 50% of support for from 6 old member who will be att	07/01/18 thru 06/30/19. Also tending college at least halftime	9
 2019, even if they do not live them), and Other people only if they now July 1, 2018 through June 30, 	e divorced or ide more tha with you (do v live with you 2019 (you w	separated, an half of their support from o not include biological child ou and you will provide more will be asked to submit proof	In July 1, 2018 through June 30, Iren if you pay child support for than half of their support from a tax	
return does not mean they are considered dependents for financial aid purposes. Full Name Age Relationship College				
Tull Nume	Agc	SELF	Texas Southmost College	
Signatures				
l understand that the financial aid office n remain incomplete until all necessary doc			understand that my financial aid will	
I certify that all information reported on t Aid Office at TSC to make corrections nece misleading information on this worksheet	essary to resolv	e any discrepancies found. WARN	•	I
Student signature:			Date//	

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