# Parent Head of Household Verification Form

**Student Name**: _____

**Student ID:** _____

**Parent Name:** _____

Please complete this form to help determine if you were eligible to file as Head of Household on your 2025 taxes. This information is required to verify the student's FAFSA submission and finalize their financial aid. If it is determined that you were not eligible to file as Head of Household, you will be required to refile your taxes with the correct filing status for the student to receive financial aid.

1. **Marital Status:**

   Were you married as of December 31, 2025?

   ☐ Yes

   ☐ No  Marriage Date: _____

2. **Living Situation:**

   Did your spouse live in your home at any time during the last six months of 2025 (a temporary absence is still considered living in the home)?

   ☐ Yes

   ☐ No

3. **Household Maintenance:**

   Did you pay more than half the cost of keeping up a home for 2025?

   ☐ Yes

   ☐ No

4. **Qualifying Person:**

   Did you have a qualifying person living with you for more than half of 2025? (A qualifying person can be your child, stepchild, foster child, or other dependent relative.)?

   ☐ Yes

   ☐ No

5. **Support for Qualifying Person:**

   Did you provide more than half of the support for the qualifying person in 2025?

   ☐ Yes

   ☐ No



I certify that the information provided on this form is true and accurate to the best of my knowledge. I understand that providing false information may result in the adjustment of your student's financial aid and could be subject to further action.

Parent Name:_____ Date _____

Parent Signature: _____

**Email** documents to finaid@mountunion.edu

**Mail** to the Office of Student Financial Aid, 1972 Clark Ave, Alliance, OH 44601

**Fax** documents to (330) 829-2814

*Please do not send any personally identifiable information via email (e.g. Social Security Numbers, dates of birth, etc.).*

**Questions? Contact the Office of Student Financial Aid**

**(330) 823-2674 finaid@mountunion.edu**