

Family Size Verification Form – 2024-2025

Student Name: _____ Student ID: _____

FAMILY SIZE INCLUDES THE FOLLOWING:

DEPENDENT STUDENT, include:

- Yourself (Student)
- Your parent(s) used on FAFSA, (include step-parent)
- Your parent(s)' other dependent children if:
 - a) your parent(s) will provide more than half of their support from July 1, 2024 through June 30, 2025, or b) 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, 2024 through June 30, 2025

INDEPENDENT STUDENT, include:

- Yourself (Student)
- Your spouse (if you are married)
- Your children, if you will provide more than half of their support from July 1, 2024 through June 30, 2025
- 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, 2024 through June 30, 2025

****NUMBER IN FAMILY****

Full Name	Age	Relationship
		Self

Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

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

Student's Signature

Date

Parent's Signature (Required if Dependent)
(BLUE)

Date
24-25 Family Size Verf Form 3/2024