

## Dependent Student Family Size Verification Form 2025–2026

Your financial aid application was selected by the U.S. Department of Education to undergo a process called verification. You and your parent must complete, sign, and submit this form listing the name and age of each of your parent(s)' family members and their relationship to you. The form must be submitted to the Financial Aid Office to continue the review process and determine your eligibility for federal student aid.

A. Student Information	Student's Name (Last, First, M.	.)	Student ID - REQUIRED	
B. Family Information List the people in your parent(s	s)' family. Include the following:			
<ul> <li>Your parent(s)' dependence of the provide more than half included in the family sereceive more than half</li> <li>Other people if they no will continue to provide</li> </ul>	ir spouse or partner, including a step dent children (even if they live apart f of their support between July 1, 202 size, though the family size can be up f of their support from your parent(s) by live with your parent(s) <b>and</b> your e more than half of their support thro	because of collect 25 and June 30, 2 odated if the child parent(s) provide ugh June 30, 202	ge enrollment), if your parent(s) v 2026. Unborn children should <u>no</u> d is born during the award year a more than half of their support a 26.	o <u>t</u> be nd will and
must sign and date the additio	n an additional sheet with the studen nal sheet.  Last Name			IT
EXAMPLE: Missy	Jones	Age 18	Relationship to You Sister	
			Self	
any additional information is that purposely giving false of	natures certifies that all the information restacted. The student and one pair misleading information could rethe U.S. Department of Education	arent MUST sigr sult in a fine, im	and date this section. I under	stand
Student's Signature			 Date	
Parent's Signature			 Date	