

Parent's Signature

■ 2025–2026 Dependent Family Size Verification Form

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.

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A. Student Information			
Student's Name (Last, First, M.I.)			Student ID - REQUIRED
B. Family Information List the people in your parent(s)' family. Include the following:		
 Your parent(s)' depermore than half of their family size, though the half of their support from the other people if they recontinue to provide mental to the provid	eir spouse or partner, including a stepp ident children (even if they live apart be r support between July 1, 2025 and Jur e family size can be updated if the child om your parent(s). How live with your parent(s) and your parent than half of their support through Jurn an additional sheet with the student's r	ecause of college enrone 30, 2026. Unborn dis born during the avarent(s) provide more une 30, 2026.	ollment), if your parent(s) will provide children should <u>not</u> be included in the ward year and will receive more than than half of their support and will
and date the additional sheet. First Name	Last Name	Λαο	Relationship to You
EXAMPLE: Missy	Jones	Age 18	Sister
Extra Eli miocy	001100	10	Self
		I	
information is attached. The st	natures ifies that all the information reported on udent and one parent MUST sign and d give false or misleading information	late this section.	
Student's Signature			Date

Date