

## 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.

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:		
<ul> <li>Your parent(s)' dependent chi more than half of their support family size, though the family half of their support from your</li> <li>Other people if they now live</li> </ul>	size can be updated if the child is bor parent(s). with your parent(s) <b>and</b> your parent(s) h half of their support through June 3	e of college enro 2026. Unborn orn during the awas) provide more 0, 2026.	Illment), if your parent(s) will provide children should <u>not</u> be included in the vard year and will receive more than than half of their support and will
First Name	Last Name	Age	Relationship to You
EXAMPLE: Missy	Jones	18	Sister
			Self
C. Certification and Signature. Each person signing below certifies that information is attached. The student ar WARNING: If you purposely give falsor both.	t all the information reported on this vand one parent MUST sign and date the	nis section.	
Student's Signature			Date
Parent Signature			 Date