

2025-2026 Dependent Student Family Size

Last Name	First Name	N_____ (_____) Student ID #	_____ Phone
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Please list the family members your parent(s) will support during the 2025-2026 academic year. Include your parent(s) and others who now live with and receive more than half of their support from your parent(s), and who will continue to receive this support between July 1, 2025 and June 30, 2026.

Section A - Household Size and Number in College

PARENTS ARE COUNTED AS NUMBER IN FAMILY SIZE

<u>First & Last Name of Family Member</u>	<u>Relationship to Student</u>	<u>Age</u>
	Student	
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Section B – Certification and Signatures

Signing this worksheet certifies that all of the information reported on it is complete and correct.

Student Signature: _____ Date: _____

Mother/Stepmother’s Signature: _____ Date: _____

Father/Stepfather’s Signature: _____ Date: _____