

2022-2023

**FAMILY SIZE
INFORMATION
INDEPENDENT STUDENT**

Student Name _____ ID # _____

List below the people in your household. Be sure to include the following:

- yourself (and your spouse if you are married)
- your children, if you will provide more than half of their support from July 1, 2022, through June 30, 2023
- other people if they now live with you, you provide more than half of their support, and will continue to provide more than half of their support from July 1, 2022, through June 30, 2023

Write the names of all household members. Also write in the name of the college for any household member who will be attending college at least half time between July 1, 2022, and June 30, 2023, who will be enrolled in a degree or certificate program.

| Full Name | Relationship to Student | Age | Name of College in 2022–2023 |
|-----------|-------------------------|-------|------------------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

BY SIGNING THIS WORKSHEET, I CERTIFY ALL THE INFORMATION REPORTED IS TRUE AND ACCURATE. I UNDERSTAND THAT IF THIS FORM IS INCOMPLETE OR RETURNED LATE, MY FINANCIAL AID WILL BE DELAYED AND A REDUCTION IN AID COULD OCCUR.

Student Signature _____ Date _____