



Dependent Student Family Size Form 2026-27

STUDENT INFORMATION:

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|------------------|-------------------|-----------|---------------------|
| Last Name | First Name | MI | Student ID # |
|------------------|-------------------|-----------|---------------------|

Family Size includes the following:

- The student
- The student’s parents (or stepparent, if applicable), even if the student is not living with them. Exclude a parent who has died or is not living in the household because of separation or divorce. Include a parent who is on active duty in the U.S. Armed Forces apart from the family.
- The student’s siblings if the following are true:
 - They live with the student’s parents (or live apart because of college enrollment),
 - They receive more than half of their support from the student’s parents, and
 - They will continue to receive more than half their support from the student’s parents during the award year.
- Other persons if the following are true:
 - They live with the student’s parents,
 - They receive more than half of their support from the student’s parents, and
 - They will continue to receive more than half their support from the student’s parents during the award year.

| Full Name | Age | Relationship to Student |
|-----------|-----|-------------------------|
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*The provided criteria for “dependent children” or “other persons” align with the requirement that family size align with whom the student could claim as a dependent on a U.S. tax return if the student were to file a U.S tax return at the time of completing the 2026-2027 FAFSA. As a result, the student should not include any unborn children in the family size.

CERTIFICATIONS AND SIGNATURES: This form must be signed in ink.

Each person signing below certifies that all information reported on this form is true and complete.

WARNING: If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.

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|-------------------------------------|--|-------------|--|
| Student Signature – REQUIRED | | Date | |
| Parent Signature – REQUIRED | | Date | |