

FINANCIAL AID OFFICE
 STUDENT SERVICES BUILDING
 MAIL CODE 4702
 1263 LINCOLN DRIVE
 CARBONDALE, IL 62901

618/453-4334
 FAX: 618/453-7305
 FAO@SIU.EDU
 FAO.SIU.EDU

**VERIFICATION OF HOUSEHOLD SIZE
 AND NUMBER IN COLLEGE
 2016-17**

D

Student's Name _____

Student ID Number/Dawg Tag _____

Date _____

Dear Financial Aid Applicant:

Information from your 2016-17 financial aid application has been received at Southern Illinois University Carbondale. Before your financial aid eligibility can be determined, additional information is required.

Please complete Sections A and B and return this form so we may continue to evaluate your financial aid eligibility. Parents (stepparents) may not be included in the number of household members in college.

A. Family Information

In the "Full Name" column, list the people in your parent's household. **Include yourself and your parents.** Do not include foster children. Include your parents' other children if (a) your parents provide more than half of their support or (b) the children would be required to provide parental information when applying for Federal Student Aid. Include other people if they now live with your parents, and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2016 through June 30, 2017. (Support includes money, gifts, loans, housing, food, clothes, car, medical and dental care, payment of college costs, etc.)

Full Name	Age	Relationship to student (parent, brother, sister, etc.)	List the name of the college for family members who will be attending college at least half-time between July 1, 2016 and June 30, 2017, and will be enrolled in a degree or certificate program. DO NOT LIST A COLLEGE FOR A PARENT. If the school uses clock hours, include only students attending at least 12 clock hours per week.
1.		Student	SIU
2.			
3.			
4.			
5.			
6.			
7.			

[] Check this box if there are more than seven family members, and attach a list of these people.

B. Student's and Parent's Certification and Signatures

WARNING: This form is used in the process of establishing eligibility for federal student aid funds. You should know that intentionally false statements or misrepresentation may subject the filer to a fine or imprisonment, or both, under provisions of the United States Criminal Code.

I (we) certify that all of the information on this form is complete and correct. (At least one parent must sign below).

 Student's signature

 Date

 Parent's signature

 Date

Documents should be faxed to 618/453-7305. If you do not have access to a fax machine, documents can be mailed to the address on the top of this form.