

Family Member in College 2022-2023



NORTHERN ILLINOIS UNIVERSITY
Financial Aid and Scholarship Office
Your Future. Our Focus.

Submit to:
Financial Aid and Scholarship Office
Swen Parson Hall 245
DeKalb, IL 60115

NIU Student's Information: For scanning purposes, use black or blue ink to complete this form.

Name _____ Z-ID _____
Last First MI

Family Member: Please complete Section I of this form then bring it to your college/university Registrar's Office to complete Section II.

Registrar of family member's college/university: Please complete Section II of this form, and return it DIRECTLY to the Financial Aid and Scholarship Office at NIU; contact information is at the bottom of this form.

SECTION I – TO BE COMPLETED BY FAMILY MEMBER IN COLLEGE

Name: _____ Institutional/Student ID #: _____

I authorize (*name of family member's institution*) _____ to release my enrollment information to the Northern Illinois University Financial Aid and Scholarship Office. My signature certifies that you may update the FAFSA for the above NIU student.

Signature: _____ Date: _____

SECTION II – TO BE COMPLETED BY THE FAMILY MEMBER'S COLLEGE/UNIVERSITY

Academic Year 2022-2023 Semester(s): Fall 2022 Spring 2023 Summer 2023

Student's enrollment status (circle one):

Full-time

Half-time

Less than Half-time

Not Enrolled

Expected month/year of graduation: _____

Degree or Certificate sought: _____

Name and Address of School: _____

Title IV School Code _____

Signature of School Official: _____ Date: _____

Printed Name and Title: _____

Phone Number/Email: _____