

Family Members in College:

- If applicable, indicate in the chart below the full name of the college for any family member who will be enrolled at least half-time in a degree, diploma, or certificate program at an eligible postsecondary institution any time between July 1, 2023 – June 30, 2024.

Full Name of Household Members Attending College		Will be Enrolled in College at least Half-Time? (per term)	Full Name of College for 2023-2024 (Fall 2023, Spring 2024, and/or Summer 2024)
First Name	Last Name	Check a box	Do Not Abbreviate
		YES <input type="checkbox"/> NO <input type="checkbox"/>	
		YES <input type="checkbox"/> NO <input type="checkbox"/>	
		YES <input type="checkbox"/> NO <input type="checkbox"/>	
		YES <input type="checkbox"/> NO <input type="checkbox"/>	
		YES <input type="checkbox"/> NO <input type="checkbox"/>	

Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is inaccurate.

Important: Please provide an explanation if there are any changes to the number of people in the household or the number that will be attending college as compared to what was originally reported on the FAFSA.

Required Signatures: *(Please print this form and then sign.)*

My signature certifies that all the information on this form is true, complete and accurate, and may be used to update the FAFSA.

Student Signature _____ Date _____

Parent Signature _____ Date _____

Note: Electronic signatures will not be accepted.

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