# HOUSEHOLD SIZE/NUMBER IN COLLEGE (DEPENDENT) 2023-2024

🗒 Fi	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 St	udent Information:	For scanning purposes, use black or blue	ue ink to complete this form.
Name	Last		Z-ID

PARENT INFORMATION

**Include** the parent(s) who provide more than half of your support and are included on the FAFSA. You should include your parents (including stepparent) even if you do not live with your parent. If a parent is not living in the household due to separation or divorce, **do not include them**.

First Name of Parent	Last Name of Parent	Relationship to Student	Date of Birth		
		-			

#### **FAMILY INFORMATION**

#### On the chart below include:

- The FAFSA parents' children if the parent(s) will provide more than half of the children's support from July 1, 2023 through June 30, 2024, or if the children would be required to provide parental information if they were completing a FAFSA for 2023-2024. Include children who meet either of these standards, even if the child does not live with the parent(s).
  - Students are required to provide parental information on the FAFSA if they are: born after 1/1/2000, not married, not a Veteran, does not have a child/dependent they support, are not enrolled in a Master's/Doctoral/other graduate program, and are not a foster child, an emancipated minor, nor a ward of the court, or considered homeless or unaccompanied youth.
- Other people if they now live with the FAFSA parent(s) and the parent(s) provide more than half of the other
  person's support and will continue to provide more than half of that person's support through June 30, 2024.

First Name	Last Name	Age	Relationship to Student (ex: sibling)

Contact the Financial Aid and Scholarship Office if you have questions about who should be included.

□ Check this box if there are more than the above household members; attach a separate sheet of paper, if necessary, with the student's name and ID number at the top. Be sure to include all necessary information from the chart.

## Continued on page 2 ->

# 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	Full Name of College for 2023-2024
		term)	(Fall 2023, Spring 2024, and/or Summer 2024)
First Name	Last Name	Check a box	Do Not Abbreviate
		YES 🗆 NO 🗆	
		YES 🗆 NO 🗆	
		YES 🗆 NO 🗆	
		YES 🗆 NO 🗆	
		YES 🗆 NO 🗆	

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.

FA Household Size/College 03/23

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