FAMILY SIZE (DEPENDENT) 2024-2025



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

NIU Student Information: Name Last	For scanning purpose First		Z-ID	
Include the parent(s) who proyour parents (including stepp separation or divorce, do not	ovide more than half of y arent) even if you do not include them.	live with your parent. If a	led on the FAFSA. Y parent is not living in hip to Student	ou should include the household due to
First Name of Parent	Last Name of F	Parent Relations	nip to Student	Date of Birth
	E 4 10	II V INFORMATION		
On the chart below include		ILY INFORMATION		
Veteran, does program, and unaccompanie Other people if they represon's support and	not have a child/dependen are not a foster child, an en ed youth. now live with the FAFSA will continue to provide i	information on the FAFSA if they support, are not enrolled nancipated minor, nor a ward parent(s) and the parent(s) more than half of that person	ed in a Master's/Doctor of the court, or consides) provide more than on's support through	al/other graduate ered homeless or half of the other June 30, 2025.
Contact the Finance	cial Aid and Scholarship (Last Nam	Office if you have questions ne Age	Relationship to Student (ex: sibling)	
If there are more than the above	e household members: a	ttach a separate sheet of pa	aper, with the student	's name and ID number
	the top. Be sure to include ease print this form and then	le all necessary information sign.)	from the chart.	
Student Signature	Date	Parent Signature	Dat	<u>e</u>
Note: Electronic signatures	will not be accepted.	WARNING: If you purposely give false or misleading informatio on this worksheet, you may be fined, sentenced to jail, or both.		