Family Size (Dependent) 2027-2028

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 Information

For scanning purposes, use black or blue ink to complete this form.

Name _____ _____ _____ Z-ID _____
Last First MI

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, 2027 through June 30, 2028, or if the children would be required to provide parental information if they were completing a FAFSA for 2027-2028. 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 1/1/2004, 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, 2028.

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

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

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

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.

FA Family Size 10/26