

2019-2020 Dependent Student Household Size and Number in College

Last Name	First Name	Student ID #	(____) _____ Phone
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Please list the family members your parent(s) will support during the 2019-2020 academic year. Include your parent(s) and others who now live with and receive more than half of their support from your parent(s), and who will continue to receive this support between July 1, 2019 and June 30, 2020.

Section A - Household Size and Number in College

Please fill in the name of the school or college **ONLY** for family members who will be enrolled at least half-time:

PARENTS ARE COUNTED AS NUMBER IN HOUSEHOLD, BUT NOT IN NUMBER IN COLLEGE

<u>First & Last Name of Family Member</u>	<u>Relationship to Student</u>	<u>Age</u>	<u>Name of School / College in 2019-2020</u>
_____	Student	_____	NSU
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Section B – Certification and Signatures

Signing this worksheet certifies that all of the information reported on it is complete and correct.

Student Signature: _____ Date: _____

Mother/Stepmother's Signature: _____ Date: _____

Father/Stepfather's Signature: _____ Date: _____