FAMILY SIZE FOR DEPENDENT STUDENTS
2016-2017

Student Name: ________________  Student ID # ____________  Phone: ________________

Please remember to sign the back of this form. Include in your parent’s household:

- Yourself
- Your parent(s). - If your parent(s) are not currently married but are living together, then list both. If your parent has remarried, then list their spouse. Same sex couples must report themselves as married and list both in the household.
- Sibling(s) (under the ages of 24), if your parents will provide more than half of their support from July 1, 2016 through June 30, 2017.
- If a parent is paying child support - Do not list this person(s) in the household size but fill out the child support section below.
- Other people if they will live with your parents the entire time July 1, 2016 – June 30, 2017 and your parents provide more than half their support. Please fill out the back side of this form under ‘Other People’. Documentation of support may be requested. Not providing this information will exclude this person from being included in the household size.
- If your parent(s) is/are enrolled in college, please fill out the section on the back of this form.

Please list your parents’ current marital status:  □ single     □ married     □ remarried

<table>
<thead>
<tr>
<th>List all household members.</th>
<th>Relationship (i.e. parent, brother, sister, etc.)</th>
<th>Age</th>
<th>Will this family member(s) be enrolled in at least 6 credit hours in college for one semester?</th>
<th>List the social security number of the family member(s) and the name and address of the college or university he/she will be attending during the 2016-2017 academic year. Do not abbreviate. Enrollment will be verified.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example</td>
<td>First &amp; Last Name</td>
<td>self</td>
<td>18</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
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</tbody>
</table>

If your response is longer than space given, please attach an additional sheet of paper with your information.

Child Support Paid
Did your parent pay child support for child(ren) not living in the household during 2015?  Yes □  No□
(Note – you may be requested to submit documentation of the support paid)

Child(ren)’s Name(s) ________________________________  Total Amount Paid in 2015 $ __________________

Child(ren)’s Name(s) ________________________________  Total Amount Paid in 2015 $ __________________

Name of Person(s) to whom the child support was paid to in 2015: ________________________________
Other People

If there are “other” people living in the household, you must provide documentation for those included. Please explain the extenuating circumstances as to why you are responsible for the individual and in what way you are supporting this person for: food, shelter, and health insurance. You are required to report any earnings or benefits the individual received. You must explain why adults are not receiving income. If your response is longer than space given, please attach an additional sheet of paper. If you do not provide in your statement the amount of benefits received, we will incomplete this form.

___________________________________________________________________________________________________________

___________________________________________________________________________________________________________

If your response is longer than space given, please attach an additional sheet of paper with your information.

This form MUST be received by our office at least 3 weeks prior to the end of the semester that you are requesting financial aid consideration. Incomplete documents will NOT be accepted by our office.

Student and parent must sign this form in blue or black ink.

Student Signature _______________________________ Date ______________

Parent Signature _______________________________ Date ______________

If a parent is enrolled in college for at least 6 credit hours, please complete the following section:

Federal Title IV Regulations state that parents attending college may not be included in the number attending college. However, each institution is allowed to use professional judgment to determine a parent’s educational status for this purpose. If you have a parent attending college at least half-time (6 or more credits) during 2016-2017 and would like our office to consider an appeal to have them included as a student, please have your parent fill out the information below. If you have more than one parent attending school, then please copy and fill out another parent’s college information – otherwise they may not be considered to be in college. Attach any documentation that you feel will support your appeal.

Parent Name _______________________________ Parent SSN _______________________________

Institution _______________________________ City/State/ZIP _______________________________

1. What degree or certificate will you be working towards in 2016-2017?

   ❑ 1st Bachelor’s Degree
   ❑ Degree beyond 1st Bachelor’s Degree (Explain degree and the reasons for pursuing a 2nd Bachelor’s Degree or advanced degree) ________________________________________________________________
   ❑ Other (Explain program and the reasons for pursuing this program) ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

I certify that I will be enrolled as a degree-seeking, certificate-seeking, or licensure-seeking student for at least one enrollment period during the 2016-2017 academic year. By signing below, I acknowledge that MSU Denver may ask me to provide an enrollment verification form from the Registrar’s Office at the institution I am attending to verify that I am enrolled at least half time (6 credit hours).

Parent Signature ___________________________________________ Date ____________________

Metropolitan State University of Denver - Office of Financial Aid and Scholarships
Campus Box 2 PO Box 173362 Denver, CO 80217 Phone (303) 556-8593 prompt 1 Fax (303) 556-4927
Email us questions: finaid@msudenver.edu http://www.msudenver.edu/financialaid/