



**FRIENDS
UNIVERSITY**

2100 W. University St. • Wichita, KS 67213

**FINANCIAL AID
2009-2010
DEPENDENT STUDENT
FAMILY SIZE STATEMENT**

STUDENT NAME: _____ **SS NUMBER:** _____

Please read all instructions carefully. Inaccurate or incomplete information may delay the processing of your financial aid file.

FAMILY SIZE INFORMATION

In the table below:

- I. List all people your parent(s) will support now, and through June 30, 2010
Include:
 - a. Yourself
 - b. Your parent(s)
 - c. Your parent(s)' children (**If parents provided more than half their support**)
 - d. Others in parent(s)' household (**If they provided more than half their support**)

Full Name Include first and last names of each individual in the household. You may use a separate sheet of paper if not all family members named will fit on this form.	Date of Birth Enter date of birth of each person in the family. Do not include siblings born before January 1, 1986 or siblings enrolled in post-secondary education.*	Relationship Include other people as part of the household ONLY IF they lived with your parent(s) and received more than half their support from your parent(s) at the time you completed the FAFSA, AND they will continue to receive more than half their support from your parent(s) from July 1, 2009 to June 30, 2010	College Attending If family members will be attending college at least half time in a degree or certificate program between July 1, 2009 and June 30, 2010, indicate name of college. If a family member will not be attending college, indicate by using N/A.
1			
2			
3			
4			
5			
6			

* Some exceptions may be made regarding persons in the household born before January 1, 1986. Please contact the Financial Aid Office for more information regarding these exceptions.

Student's Signature

Date:

Parent's Signature (Only one parent must sign)

Date: