## STUDENT FINANCIAL SERVICES

3307 Third Avenue West, Suite 114 Seattle, WA 98119

Parent Signature

T 206-281-2061 or 800-737-8826 | F 206-281-2835 | sfs-info@spu.edu | spu.edu/sfs



## 2015 - 2016 DEPENDENT HOUSEHOLD SIZE FORM

2015 - 2016 Di	PENDENI HOU	SERU	LD SIZE FORIVI
STUDENT NAME:		_ SPL	J ID:
This form is to verify the total number of recollege as listed on your 2015-2016 Free instructions carefully before completing	Application for Federa	al Studer	nt Aid (FAFSA). Review the following
<ul> <li>parents from July 1, 2015 to June 30 these children when filing a 2015-20 they do not live with your parent(s).</li> <li>Other people if they currently live wi your parents will continue to provide money, gifts, loans, housing, food, on to include foster children.</li> <li>Include the name of the college for a half time in a degree, diploma, or ce between July 1, 2015, and June 30,</li> </ul>	ther children if they will 0, 2016 or if your parent 016 FAFSA. Include cheth your parents, your parties support between clothes, car, medical around household member trificate program at a parties. Do not include	I receive nts would ildren wh parents p July 1, 2 nd dental er (excep postseco e sibling	e more than half their support from your do be required to provide information for no meet either of these standards, even if provide more than half their support, and 2015 and June 30, 2016 (support includes I care, payment of college costs, etc.). Do to parents) who will be enrolled, at least andary educational institution any time
Name	Relationship to Applicant	Age	2015 - 2016 College Name (If applicable)
	Self		SPU
By signing this Verification Statement, we attest that all information reported on this form is true and complete to the best of our knowledge. If asked, we agree to submit documentation supporting the information provided on this form.  WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to prison, or both.			
Traditio. II you purposely give false of fillslea	amy information on this w	or Rolledt,	, you may be inted, sentenced to prison, or both.
Student Signature			

Date

Phone

**Email**