

Please complete all sections using INK.

A. Student Information

Student's Last Name _____ Student's First Name _____ Student's M.I. _____ **U00** _____
Student's ID Number

B. Student and Family Information

Dependent Students

List below the people who should be included in your parent(s) family size:

- Yourself and your parent(s) (including a stepparent) even if you do not live with your parent(s).
- Your parent(s)' other children if your parent(s) will provide more than half of their support from July 1, 2024 through June 30, 2025, or if the other children would be required to provide parental information if they were completing a FAFSA for 2024–2025. Include children who meet either of these standards, even if they do not live with your parent(s).
- Other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support from July 1, 2024 through June 30, 2025.

Independent Students

List below the people who should be included in your family size:

- Yourself and your spouse, if you are married.
- Your children, if any, if you will provide more than half of their support from July 1, 2024 through June 30, 2025, or if the child would be required to provide your information if they were completing a FAFSA for 2024–2025. Include children who meet either of these standards, even if they do not live with you.
- Other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2024 through June 30, 2025.

Full Name	Age	Relationship to You	Attending College At least Half-Time	Name of College
(Example) Chris Jones	18	Student	<input type="checkbox"/> Yes <input type="checkbox"/> No	SUNY Poly
1.		Self/Student	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.			<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.			<input type="checkbox"/> Yes <input type="checkbox"/> No	
4.			<input type="checkbox"/> Yes <input type="checkbox"/> No	
5.			<input type="checkbox"/> Yes <input type="checkbox"/> No	
6.			<input type="checkbox"/> Yes <input type="checkbox"/> No	

If more space is needed, attach a separate page with the student's name and student's ID number at the top.

C. Certifications and Signatures

I/We certify that all of the information on this worksheet is complete and correct.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____ (Dependent Student Only)