

2026-27 Dependent Family Size Clarification

After a review of your application, there appears to be conflicting information regarding who is in your household. Please complete this form to include all of the household members.

A. Student Information

Last Name: _____ First Name: _____ MI: _____

NSHE: _____

B. Parent Household Information

Please list the people in your parent(s)' household, including:

- Yourself, even if you do not live with your parents
- Your parent and their spouse (if they are married or remarried)
- Your parent(s)' other dependent children, if your parent(s) will provide more than half of their support between July 1, 2026 and June 30, 2027.
- Other dependents only if they live with your parent(s) and your parent(s) will provide more than half of their support between July 1, 2026, and June 30, 2027

Full Name	Age	Relationship to Student
		Self (student)
		Parent

C. Signature	
By signing this form, I certify that all information is completed and accurate.	
_____	_____
Student Signature	Date
_____	_____
Parent Signature	Date