

LAST NAME	FIRST NAME	MIDDLE INITIAL	9-DIGIT CAMPUS ID #
DAYTIME PHONE			EMAIL ADDRESS

The Student Financial Assistance office requests verification of your household size. **Please return this form promptly to the SFAO so that financial aid processing can continue.**

WAS YOUR PARENT'S INFORMATION REQUIRED TO COMPLETE YOUR FAFSA?	
<p style="text-align: center;">YES</p> <ol style="list-style-type: none"> 1. List yourself. 2. Your parent(s). 3. Your parent's other children if: <ol style="list-style-type: none"> a. your parent(s) will provide more than half of the child's support and b. that child can answer "No" to every question in Step 3 (dependency status) of the FAFSA 4. Other people if: <ol style="list-style-type: none"> a. they are living with your parents now b. your parents provide more than half of their support and c. your parents will continue to provide more than half of their support from July 1, 2008 through June 30, 2009 	<p style="text-align: center;">NO</p> <ol style="list-style-type: none"> 1. List yourself and your spouse (if married). 2. Your children, if you will provide more than half their support from July 1, 2008 through June 30, 2009. 3. Other people if: <ol style="list-style-type: none"> a. they are living with you now, b. you provide more than half of their support and c. you will continue to provide more than half of their support from July 1, 2008 through June 30, 2009

	Full Name of Family Member <small>(Please print)</small>	Age	Relationship of this Individual to the Student
1			<i>SELF</i>
2			
3			
4			
5			
6			
7			

CERTIFICATION STATEMENT	
<p>I certify that the submitted information is true and correct to the best of my knowledge and belief. If asked by an authorized official, I agree to provide proof of the information provided on this form. I understand that purposely providing false or misleading information on this form may result in reduction or repayment of aid, fines and/or imprisonment in this and/or future years.</p>	
STUDENT SIGNATURE	DATE
PARENT SIGNATURE (ONLY IF PARENTAL INFORMATION WAS REQUIRED ON FAFSA)	DATE

students.asu.edu/financial-aid			
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