VERIFICATION OF HOUSEHOLD SIZE  
DEPENDENT STUDENT  
2021-2022 Academic Year 
Financial Aid Office 
Framingham State University, McCarthy Center 
5th Floor, 100 State Street, Framingham MA 01701 

INSTRUCTION 
• If you are using assistive technology and need assistance filling out this form, please contact the Financial Aid Office at (508) 626-4534.

• Digital signatures are not accepted. Email is not a secure method for submitting documents. Please submit this form with relevant documentation via fax (508) 626-4598, mail, or in person to Financial Aid Office.

• This form will not be processed if any items are left blank or illegible. Please print clearly and answer all applicable questions. If clarification of your situation is necessary, additional information or documentation may be required.

SECTION 1: STUDENT INFORMATION 
Last Name: First: M.I.: FSU ID# 
Student’s Street Address (include apt. #):

Phone Number: Email Address:

SECTION 2: YOUR PARENT’S HOUSEHOLD INFORMATION 
If additional space is needed to list the full household, attach a separate page. 
• Line 1: List yourself, even if you do not live with your parent(s).

• Lines 2-3: List parent 1 (The parent you have lived with most in the last 12 months.) and parent 2/stepparent (if married or if both parents live together).

• Lines 4-6: List your parent’s/stepparent’s other children if your parent(s)/stepparent will provide more than half of the children’s support from July 1, 2021, through June 30, 2022, or if the other children would be required to provide parent/stepparent information if they were completing a FAFSA for 2021-2022. Include children who meet either of these standards, even if a child does not live with the parent(s)/stepparent.

• List other people if they now live with your parent(s)/stepparent and your parent(s)/stepparent provide more than half of that person’s support, and will continue to provide more than half of that person’s support through June 30, 2022.

<table>
<thead>
<tr>
<th>Full Name of each household member</th>
<th>Age</th>
<th>Relationship of each household member to the student</th>
<th>If you have a sibling planning to be enrolled at least half time for 2021-2022, provide the Name of the College they will be attending</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Self Framingham State University</td>
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<tr>
<td>2. Parent 1 Not Applicable</td>
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<tr>
<td>3. Parent 2 / Stepparent Not Applicable</td>
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<td>4.</td>
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<td>6.</td>
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</table>

SECTION 3: CERTIFICATION 
WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both. Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and one parent must sign and date.

Student Signature: Date:  
Parent Signature: Date: