

Instructions:

- This form will not be processed if any items are left blank or illegible. Answer all applicable questions.
- Please type or print clearly.
- Submit all required and relevant documentation with this form by fax, mail, or in person.
- If clarification of your situation is necessary, additional information or documentation may be required.

PART 1: STUDENT INFORMATION

Last Name	First Name	M.I.	FSU ID #	
Student's Street Add	ress (include apt. no)			
Phone Number: () -	Email Address:		

PART 2: STUDENT'S HOUSEHOLD INFORMATION

Instructions: Family size should align with whom the parent could claim as a dependent on a U.S. tax return if the parent were to file a U.S. tax return at the time of completing the 2024-2025 FAFSA. As a result, the parent should not include any unborn children in the family size. If additional space is needed to list the full household, attach a separate page.

Family size should include the following:

- Line 1: List the student.
- Lines 2-3: List the student's parents, even if the student is not living with them. Exclude a parent who has died or is not living
 in the household because of separation or divorce. Include a stepparent if your parent has remarried. Include a parent who is
 on active duty in the U.S. Armed Forces apart from the family.
- 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, 2024, through June 30, 2025, or if the other children would be required to provide parent/stepparent information if they were completing a FAFSA for 2024-2025. 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 the other person's support, and will continue to provide more than half of that person's support through June 30, 2025.

	Please indicate the <u>Full Name</u> of each household member	Please list the <u>Age</u> of each household member	What is the <u>Relationship</u> of each household member to the student?
1.			Self
2.			Parent 1
3.			Parent 2/Stepparent
4.			
5.			
6.			

PART 3: CERTIFICATION 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. **WARNING**: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both. **Digital signatures are not accepted.**

Student Signature:	Date:
Parent Signature:	Date:

Return this completed form to: Financial Aid Office • Framingham State University • McCarthy Center, 5th Floor • 100 State Street Framingham, MA 01701 • Phone: (508) 626-4534 • Fax: (508) 626-4598