



Southern Illinois University Carbondale
 618/453-4334 fax: 618/453-7305
 900 S. Normal Avenue
 Financial Aid Office, Woody Hall, B-Wing
 Carbondale, IL 62901-4702
 fao@siu.edu www.siu.edu/~fao/

**VERIFICATION OF HOUSEHOLD SIZE
 AND NUMBER IN COLLEGE**

2008-09

I

Student's Name _____

Student Identification Number _____

Date _____

Dear Financial Aid Applicant:

Information from your 2008-09 financial aid application has been received at Southern Illinois University Carbondale. Before your financial aid eligibility can be determined, additional information is required.

Please complete Sections A and B and return this form so we may continue to evaluate your financial aid eligibility.

A. Family Information

List the people in your household. **Include yourself and your spouse (if you have one)**. Do not include foster children. Include your children if you provide more than half of their support. Include 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, 2008 through June 30, 2009. (Support includes money, gifts, loans, housing, food, clothes, car, medical and dental care, payment of college costs, etc.)

Full Name	Age	Relationship to student (spouse, son, daughter)	List the name of the college for family members who will be attending college at least half-time between July 1, 2008 and June 30, 2009, and will be enrolled in a degree or certificate program. If the school uses clock hours, include only students attending at least 12 clock hours per week.
1.		Student	SIUC
2.			
3.			
4.			
5.			
6.			
7.			

Check this box if there are more than seven family members, and attach a list of these people.

B. Student's Certification and Signature

WARNING: This form is used in the process of establishing eligibility for federal student aid funds. You should know that intentionally false statements or misrepresentation may subject the filer to a fine or imprisonment, or both, under provisions of the United States Criminal Code.

I certify that all of the information on this form is complete and correct.

 Student's signature Date