

2018-2019

HOUSEHOLD SIZE CLARIFICATION- INDEPENDENT STUDENT

Student:

First Name: _____ Last Name: _____ Student ID# _____

Clarification of the number of people in your household is needed before we can determine financial aid eligibility.

FAMILY INFORMATION

List the people in your household, include: (a) yourself, and your spouse if you have one; (b) your children, if you will provide more than half of their support from July 1, 2018 through June 30, 2019; and (c) any 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, 2018 through June 30, 2019. Also write in the name of the college for any family member who will be attending college at least half time between July 1, 2018 and June 30, 2019, and will be enrolled in a degree, diploma, or certificate program. **If additional space is required, please attach a written statement.**

Full Name	Age	Relationship	College
		Self	Embry Riddle Aeronautical University

If additional space is needed or if you would like to make a comment regarding household clarification, please use the space provided:

We cannot process your financial aid until verification has been completed. Please provide the required documents as soon as possible to avoid delay.

By signing this form, I declare that all information on this form is true and correct and all sources of income have been reported to the best of my knowledge. I understand that I will be responsible for returning all student financial aid monies received due to inaccurate, false, or misleading information being provided on this form and/or any other documents submitted to the Financial Aid Office. In addition, I understand that Embry-Riddle Aeronautical University reserves the right to assume standard levels of income in certain situations.

Student Signature

Date