UNION UNIVERSITY
Student Financial Aid

Student ID:		
Last Name	First Name	Middle Init.

Family Size Verification 2026-27 - DEPENDENT

Student Financial Aid is required to confirm the accuracy of the information provided on the 2026-27 FAFSA. To do so, please complete the information below. Once completed, please print, sign, and return this form to our office through the Self-Service account. Information on using Self-Service can be found here - *https://www.uu.edu/financialaid/verify*. Do not email forms with Personally Identifiable Information. If you have questions, please contact our office for assistance.

1) List the individuals in your family size*, including:

- Yourself, the student
- Your parent(s) included on the FAFSA
- Your siblings if the following are all true: 1) they live with your parents (or live apart because of college enrollment), 2) they receive more than half of their support from your parents, AND 3) they will continue to receive more than half their support from your parents during the 2026-27 academic year
- Other persons if the following are all true: 1) they live with your parents, 2) they will receive more than half of their support from your parents, AND 3) they will continue to receive more than half of their support from your parents during the 2026-27 academic year.

**The provided criteria aligns with the requirement that family size is defined with whom the parent could claim as a dependent on a U.S. tax return. As a result, any unborn children should not be included in family size.*

Full Name	Age	Relationship to Student
		Self

2) Certification and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

*Student Signature*_____ *Date:* _____

Parent Signature: _____ *Date:* _____