Family Clarification Form 2020-2021

University of Rochester Financial Aid Office

Student Name _____ Student ID _____

The information reported on your financial aid application regarding your family size and the number of family members in college requires clarification.

List all family members who live at your **permanent address** and receive more than half of their support from your parents (yourself, parents and/or stepparents, siblings, others). Non-custodial parents should not be listed. If you are independent, please list yourself, your spouse and your dependents who receive more than half of their support from you and your spouse. Use additional paper as necessary. Only list college information for students enrolled in a minimum of 6 credits per term in a degree-seeking program for the 2020-2021 academic year.

Full Name	Age	Relationship	College	Full/Part Time	Degree
Sue Jones (example)	49	Mother	n/a		
Jeff Jones (example)	20	Brother	City College	Full Time	B.A.
		Self	University of Rochester		

If you are a dependent student, you must have one of your parents sign to certify accuracy. If you are a married student, your spouse must sign.

Please contact our office with any questions.

Student Signature _____ Date _____ Parent or Spouse Signature _____ Date _____

www.enrollment.rochester.edu/financial-aid
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(585)275-3226 fax (585)756-7664