

2023-2024 Clarification Form: Household Size

Instructions

The household information you listed on your 2023-2024 Free Application for Federal Student Aid (FAFSA) does not match the household information you submitted on your 2023-2024 verification form. Clarification of the number of people in your household is needed before we can determine your financial aid eligibility.

Section I: Student Information

Student Name _____

UNF ID# N _____

Section II: Clarification of Household Size

Mark your student type and provide information as instructed below.

Dependent Student

List the people in your legal parent(s) household. Include:

1. Yourself
2. Your legal parent(s) whom you listed on the FAFSA
3. Your legal parents' other children (even if they do not live with your legal parents) if
 - a. Your legal parents will provide more than half of their support from July 1, 2023 to June 30, 2024 or
 - b. The children would be required to provide legal parental information when applying for federal student aid.
4. Other people if they now live with your legal parents and if your legal parents will provide more than half of their support from July 1, 2023 to June 30, 2024

Do not include foster children or children for whom your legal parent(s) are paying child support.

Independent Student

List the people in your household. Include:

1. Yourself
2. Your spouse (if applicable)
3. Your children (even if they do not live with you) if you will provide more than half of their support from July 1, 2023 to June 30, 2024
4. Other people if they now live with you and if you will provide more than half of their support from July 1, 2023 to June 30, 2024

Do not include foster children or children for whom you or your spouse are paying child support.

Section III: Clarification of Household Size and Number in College

List the full name, age, date of birth and relationship to student for all people included in the count above. For any household member who will be enrolled **at least half-time** in a degree, diploma or certificate program at an eligible postsecondary educational institution between July 1, 2023 and June 30, 2024, list the name, city and state of the college. **Do not include** siblings who attend U.S. military academies. For those not attending college, mark N/A for not applicable. Attach a separate sheet if necessary.

Full Name	Age	Date of Birth mm/ dd /yyyy	Relationship to Student	College Name, City, State	Enrolled at Least 1/2
			<i>Self</i>	<i>UNF, Jacksonville, FL</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No
					<input type="checkbox"/> Yes <input type="checkbox"/> No

Section IV: Required Signatures

By signing below, you and/or your parent(s) (if dependent student) or spouse (if applicable) certify that all the information reported on this form and any attached documents is accurate and true. You acknowledge that it is your responsibility to monitor your financial aid for any updates or additional requests for documentation or clarification and respond in a timely manner. Warning: If you purposefully give false or misleading information, you may be fined, sentenced to jail or both.

Student Signature

Date Signed

Parent Signature; Spouse (if applicable)

Date Signed

Submit completed documents via myWings(StudentPortal):

Student Resources tile > Student Self-Service > Upload Student Documents