

Step 1 Household Information

List the people in your household, including:

## 2026-27 Clarification of Household Size

• Other people stepparent of than half of *Support includes reference is near the space is near the sp	ne children would be SA for 2026-27, even le if they live with you (if applicable) provious their support from money, housing, foo	n if they do our parent(s de more tha July 1, 2026 od, clothes, curate page w	o provide parental informont live with your paren ) and stepparent (if appin half of their support* 5 through June 30, 2027 ar, medical/dental care with student's name and	t(s) and stepparent (if licable) and your paren and will continue to pr	applicable). it(s) and
Full Name	Relationship to Student	Age (REQUIRED)	Will he/she receive more than half of their support from your parent(s) and stepparent (if applicable)?	Full Name of College	Enrolled at leas Half Time Yes/N
	Self				○Yes / ○N
	Parent 1				
	Parent 2/Stepparent (If Applicable)				
	Please continue to list	additional fan	nily members or others that a	re being supported more the	in 50%
			∘Yes / ∘No		○Yes / ○N
			∘Yes / ∘No		○Yes / ○N
			∘Yes / ∘No		○Yes / ○N
-	•		e information reported o	on this worksheet is cor	nplete and
Student Signature		Date	Paren	t Signature	Date

Student Name: \_\_\_\_\_\_ Wes or Applicant ID: \_\_\_\_\_

o your parents will provide more than half of their support\* from July 1, 2026 through June 30,

Yourself (student), and your parent(s) and stepparent (if applicable). Your parents' and stepparent's (if applicable) other children if: