



Office of Financial Aid

315 Turnpike Street
 North Andover, MA 01845
 Phone: 978-837-5186

Fax: 978-837-5067
 e-mail: financialaid@merrimack.edu
www.merrimack.edu/aid

2016-2017 Confirmation of Family Size/Number in College

Student Name _____ Student ID# _____

In review of your Free Application for Federal Student Aid (FAFSA) we have identified some information that needs clarification. Please complete the following table concerning your family members according to the dependency status indicated below. Once completed and signed, please return this form to the Office of Financial Aid via mail, fax or email. Please note that email forms must be signed and scanned.

Dependent Student

- ♦ Your parents and yourself, even if you do not live with your parents.
- ♦ Your parents; other children if (a) you parents will provide more than half of their support from July 1, 2016 through June 30, 2017 or (b) the children would be required to provide parental information when applying for Federal Student Aid.
- ♦ Other people if they now live with your parents, your parents provide more than half of their support, and your parents will continue to provide more than half of their support from July 1, 2016 through June 30, 2017.

Independent Student

- ♦ Yourself (and your spouse if you have one).
- ♦ Your children, if you will provide more than half of their support from July 1, 2016 through June 30, 2017.
- ♦ Other people if they now live with you, you provide more than half of their support, and you will continue to provide more than half of their support from July 1, 2016 through June 30, 2017.

Name of Student and Family Members (as outlined above)	Relationship To Student	Age	What college (if any) is person attending in 2016/2017? Note: Do not include parents in college.	Will attendance be at least ½ time and part of a degree of certificate program?		Expected Graduation Date
				YES	NO	
	Self		Merrimack College	YES	NO	
				YES	NO	
				YES	NO	
				YES	NO	
				YES	NO	
				YES	NO	

If you need additional space, attach a separate sheet.

Each person signing this worksheet certifies that all of the information reported on it is complete and accurate.

 Student's Signature (required)

 Date

 Parent's Signature (required for dependent student)

 Date