



Return to: Office of Financial Aid
P.O. Box 6804 UH-146
Fullerton, CA 92834-6804

BEFORE printing enter student CWID above

STUDENT FAMILY SIZE CERTIFICATION (2011-2012)

PRINT CLEARLY AND USE BLACK INK

TELL US ABOUT YOUR FAMILY SIZE

Fill in the information about the people that you (and your spouse) will support between July 1, 2011 and June 30, 2012. Include:

- yourself (list yourself on the first line),
- your spouse (if you are married), and
- your dependent children (if they receive more than half of their support from you or your spouse).

INCLUDE OTHER PEOPLE ONLY IF THEY:

- lived with and received more than half of their support from you or your spouse at the time you completed your Free Application for Federal Student Aid
AND
- will continue to receive this support between July 1, 2011 and June 30, 2012.

List all family members that meet the definition listed above. In addition, check yes for each family member listed who is enrolled in six (6) or more units that can be applied toward a college degree or certificate program. **Attach a separate sheet if you need more space.**

<u>Full Name</u>	<u>DOB</u>	<u>Relationship</u>	<u>College</u>	<u>Enrolled in 6 or more units</u>	
Student Example Pat Student	12/12/83	Self	CSUF	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	Self	_____	<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
_____	_____	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

CERTIFICATION:

By signing this form, I (we) certify that all of the information reported on this form and any attachments hereto is true, complete and accurate. I (we) agree to provide additional proof of the information I (we) have reported, if requested to do so. I also certify that I have read the rights and responsibilities section of the CSU Fullerton, Financial Aid website (<http://www.fullerton.edu/financialaid/awinfo/capbody.htm>)*

Signatures are required for all persons reporting information above.

Student's Signature: _____ Date: _____

Spouse's Signature: _____ Date: _____

Print Student's Name: _____ CWID _____

***Warning:** If you give false or misleading information on documents submitted to the Office of Financial Aid, you may be fined, be sentenced to jail or both.