



SIBLING VERIFICATION FORM

We are asking the registrars at colleges attended by our students' siblings or spouse to complete this form and return it directly to the Financial Aid Office. Do not submit this form for completion until early Fall 2022 once sibling/spouse is enrolled. If we do not receive the form by **October 15**, we will assume that the sibling or spouse is not enrolled, and our student's financial aid will be adjusted accordingly.

SECTION A · TO BE COMPLETED BY EARLHAM COLLEGE STUDENT

Student Name

Please print or type

Student ID Number

Number of siblings in college

Complete separate form for each

SECTION B · TO BE COMPLETED BY SIBLING

Sibling Name, Please print or type

I,

authorize

Name of institution

to release my enrollment information to the Office of Financial Aid at Earlham College.

Sibling Signature

Date

SECTION C · TO BE COMPLETED BY SIBLING'S SCHOOL NAMED ABOVE

This form must be submitted to sibling's school to complete Section C.

Student's enrollment status for 2022-23

☐ Full-time☐ Half-time☐ Less than Half-time☐ Not Enrolled

Date of enrollment

Start date

End date or present

Expected month/year of graduation

Degree or Certification sought

Signature

Date

Name and Title

Name and address of school

Street address 1

Street address 2

City

State

Zipcode

Phone Number of school

*Please affix
school stamp
or seal here.*