



FAMILY SIZE VERIFICATION WORKSHEET

Complete this form only if specifically requested by the Earlham College Office of Financial Aid.

SECTION A · STUDENT INFORMATION

Student Name	Student ID Number
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Please print or type

Street address	City	State	Zipcode
<input style="width: 100%;" type="text"/>			

SECTION B · NAMES, AGES AND SCHOOLS OF FAMILY MEMBERS

Please list the family members living in your household for the 2023-24 academic year below. Include yourself, your parent(s), stepparent(s), and your parent(s) other dependent children living in your household. Include other people only if they will live with and will receive at least half of their support from your parent(s) during the entire period from 7/1/23 to 6/30/24.

For each person in the household attending school at least half-time in 2023-24, indicate the college/university they will attend. We will verify this information in October.

Full Name	Age	Relationship to student	Name of eligible college*	Graduate student?
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	Self	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>				
<input style="width: 100%;" type="text"/>				
<input style="width: 100%;" type="text"/>				
<input style="width: 100%;" type="text"/>				
<input style="width: 100%;" type="text"/>				

* Must be attending college at least half-time during 2023-24. College must be eligible to participate in Title IV programs.

SECTION C · SIGNATURES

Student Signature	Date
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Parent Signature	Date
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>