UCLA Financial Aid Office

2007-08 HOUSEHOLD SIZE/ NUMBER IN COLLEGE VERIFICATION FORM

Your file has been selected for Verification of Household Size and Number in College. Please complete this form and return it to the Financial Aid Office. We are unable to evaluate your file until this information is received.

Last Name First Name Middle Initial UID

Dependent Students **-** List your parents and their dependents for the 2007-08 academic year. Include yourself, your parents, and your parents' other dependent children. Include other people only if they live with and receive at least half of their support from your parents during the entire period from 7/1/07 to 6/30/08.

Independent Students **-**List your dependents for the 2007-08 academic year. Include yourself, your spouse, and your dependent children. Include other people only if they will live with and receive at least half of their support from you during the entire period from 7/1/07 to 6/30/08.

Name of Family Member	Age (as of 12/31/07)	Relationship to student	Name of **College** attended at least half-time during 07-08	Graduate student? Y/N
		SELF		

CERTIFICATION STATEMENT: I certify that all information reported on this form is true and accurate to the best of my knowledge.

Student Signature Date Parent Signature Date

Return to: UCLA Financial Aid Office; A-129 Murphy Hall; Box 951435; Los Angeles, CA 90095-1435
FAX: 310-206-7419