



2025-2026 Family Size Verification

| | | | |
|-------------------|------------|----------|-------------------|
| Last Name | First Name | MI | LIU ID Number |
| Street Address | | | Date of Birth |
| City | State | ZIP Code | E-Mail Address |
| Cell Phone Number | | | Home Phone Number |

Please complete the grid below, including the name, age, and relationship to the student of all family members. The criteria for who is considered part of your Family Size is provided below. In regards to "dependent children" or "other persons", the criteria align with whom the student, spouse or parent(s) could claim as a dependent on a U.S. tax return if they were to file a U.S tax return at the time of completing the 2025-2026 FAFSA. As a result, unborn children should not be included in family size. In addition, the dependent must reside and receive support for the entire 2025-2026 aid year, which runs from July 1st, 2025 through June 30th, 2026.

Dependent Students:

- Yourself and your parent(s)
- Your parent(s)' other children if the parent(s) provide more than half of their support now and will continue to do so through the 2025-26 aid year. Include children who meet this criteria, even if they do not live with your parent(s) due to a temporary circumstances, such as college attendance.
- Other people if they live with your parent(s) and your parent(s) provide more than half of their support now and will continue to do so through the 2025-26 aid year.

Independent Students:

- Yourself and your spouse (if married);
- Your children, if you or your spouse provide more than half of their support* now and will continue to do so through the 2025-26 aid year. Include children who meet this criteria, even if the children do not live with you due to a temporary circumstances, such as college attendance.
- Other persons if they live with you and you/your spouse provide more than half of their support* now and will continue to do so through the 2025-26 aid year.

***Support** includes: money, gifts, loans, housing, food, clothes, transportation, medical and dental care, payments of college costs, etc.

| | Full name of all family members | Age | Relationship to student |
|----|---------------------------------|-----|-------------------------|
| 1 | | | Self |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | | | |

Comments:

We certify that all the information reported on this worksheet is complete and correct. We understand that if we purposely give false or misleading information, we could be fined, jailed, or both.

Student's Signature

Date

Parent's/Spouse's Signature

Date

This form must be completed and then signed and dated by the student and a parent for dependent students.
For your security and convenience please upload the completed form, and attachments if needed, at <https://apply.liu.edu/documents/>