



Student's name _____ Valpo ID # _____

A. Parent(s) in the household:

- List your Parent(s) you were required to use on your Free Application for Federal Student Aid (FAFSA).
- If your parents are divorced, list your parent and stepparent, if your parent is remarried.
 - List the parent you lived with the most during the past 12 months at the time you completed the FAFSA
 - If you lived the same amount of time with each parent, list the parent (and that parent's spouse, if remarried) who provided more financial support during the past 12 months or during the most recent year you received support from a parent

<u>Parent(s) Full Legal Name</u>	<u>Date of Birth</u>	<u>Relationship to Student</u> <u>(Mother/Father/Stepparent)</u>

Parents Marital Status

<input type="checkbox"/> Never Married (Single)	<input type="checkbox"/> Parents are Married or Remarried Date: _____
<input type="checkbox"/> Parents are legally Separated Date of Separation: _____	<input type="checkbox"/> Parents are Divorced Date of Divorce: _____
<input type="checkbox"/> Parents are not married but living together	<input type="checkbox"/> Parent is Widowed and not remarried Date became widowed: _____

B. Additional Household Members

- Include siblings who were/are away at college during this time.
- List the name of the college any of these individuals will be attending in 2023-2024
- Include others who reside in the household for whom the parent(s) are providing more than 50% percent of their support from July 1, 2023 to June 30, 2024.

(Do not include children for whom a parent is paying child support.)

Full Name	Age	Relationship	Undergrad/ Graduate	Full-Time/ Half-Time	Expected Graduation Date	Name of College attending for 2023-2024
		Self	Undergrad	Full-Time		Valparaiso University

Certification and Signatures

I certify that all the information reported on this worksheet is complete and correct. The student and a student's parent must sign this worksheet. **Electronic signatures are not accepted.**

Student Signature _____ Date _____

Parent Signature _____ Date _____