

Your financial aid application(s) (*PROFILE* and/or *FAFSA*) contain incomplete, inconsistent, and/or unclear household information. Please complete the table below, using the data that was correct as of the date you completed and signed your Free Application for Federal Student Aid (FAFSA), and return this form to the Office of Student Financial Aid. Wake Forest will use the responses you provide on this form to make a decision regarding demonstrated need and to make any necessary corrections in the calculation of federal program eligibility.

The instructions below correspond to the federal definition of household size/number in college. The people you list in this table **MUST** be eligible for inclusion under the federal definition. *The federal definition of "parent" includes only the custodial parent and that parent's current spouse. In case of separation or divorce of natural parents, the non-custodial parent is not to be listed in the table. List all household members*, including parents and siblings, whether or not enrolled in college.

Write in the names and data for: (1) **your parent(s)**; (2) your parents' **other children**, if (a) your parents provide more than half of their support, or (b) the children do not meet the federal definition of independence according to the instructions in Step 2 of the FAFSA; (3) **other people**, if they now live with your parents, and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2009 through June 30, 2010. *Support includes money, gifts, loans, housing, food, clothes, car, medical and dental care, payment of college costs, etc.* If there are more than 8 household members, please continue by providing all requested information on the reverse side.

List the college or university each household member will be attending in 2009-2010 only if that person is working toward a degree or certificate leading to a recognized educational degree at a college that is eligible to participate in federal aid programs. "Half-time" means a minimum of 6 credit hours (or 12 weekly clock hours at schools not using credit hours).

	Full name of family member	Relation-ship code*	Age	2008-2009 school year				2009-2010 school year			
				College name	Year in school	Scholarships and grants	Parents' contribution	At least one term		College	
								full-time	half-time	Type*	Name
1	You-the student applicant					\$	\$				
2						\$	\$				
3						\$	\$				
4						\$	\$				
5						\$	\$				
6						\$	\$				
7						\$	\$				
8						\$	\$				

* Relationship codes: 1 = student's parent, 2 = student's stepparent, 3 = student's brother or sister, 4 = student's husband or wife, 5 = student's son or daughter, 6 = student's grandparent, 7 = student's stepbrother or stepsister, 8=other.

* College type codes: 1 = 2-year public college, 2 = 2-year private college, 3 = 4-year public college/university, 4 = 4-year private college/university, 5 = graduate/professional school, 6 = proprietary school.

I certify that the information reported on this form is correct and complete to the best of my knowledge.

Student's Printed Name

Student's WFU ID#

Student's Signature

Date Signed

Parent's Signature (father or stepfather)

Date Signed

Parent's Signature (mother or stepmother)

Date Signed