



CALIFORNIA STATE UNIVERSITY  
**FULLERTON**

Return to: Office of Financial Aid  
P.O. Box 6804 UH-146  
Fullerton, CA 92834-6804



Enter Student's  
CWID Here:

F0HSZP

## PARENT FAMILY SIZE CERTIFICATION (2015-2016)

PRINT CLEARLY AND USE BLACK INK

### INSTRUCTIONS:

Fill in the information about the people that your parents will support between July 1, 2015 and June 30, 2016. See definition of parent below. *Incomplete documents will not be returned. They will be disposed of in a secure manner, per university policy. This will delay processing.*

**Definition of parent:** For the FAFSA, "parent" refers to your biological and/ or adoptive parents (including your step-parent if that person is currently married to your "parent").

The following are **NOT considered to be a "legal parent" for the FAFSA:**

- Grandparents, foster parents, legal guardians, aunts and uncles are NOT considered parents unless they have legally adopted you.
- Any person who is not married to your parent and who is not a legal or biological parent

If your parent's FAFSA marital status is "married," or "unmarried and both parents living together," then both their information must be provided

### INCLUDE:

- yourself (list yourself on the first line),
- your parent(s), and
- your parents' dependent children (if they receive more than half of their support from your parents, or if they would be required to provide parental information when applying for federal student aid).

### OTHER PEOPLE MAY BE INCLUDED ONLY IF THEY:

- lived with and received more than half of their support from your parents at the time you completed your (FAFSA) and will continue to receive this support between July 1, 2015 and June 30, 2016.

### TELL US ABOUT YOUR PARENT'S FAMILY SIZE:

List all family members that meet the definition listed above. In addition, check yes for each family member listed, **other than parents**, who are enrolled in six (6) or more units that can be applied toward a college degree or certificate program (parent educational expenses are not considered). Attach a separate sheet if you need more space.

Full name	Date of Birth	Relationship (i.e., son, niece, etc.)	List college	Enrolled in 6 or more units
Example Taylor Smith	02/02/2000	Self	CSUF	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Example Mom Smith	03/10/1946	Mom	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No

### CERTIFICATION:

By signing this form, I certify that all of the information reported on this form and any attachments hereto is true, complete, and accurate. I agree to provide additional proof of the information we have reported, if requested to do so.

*\*Only one parent signature is required. Signing parent must be a parent that provided information on the FAFSA.*

Signatures are required.

\*Parent Signature: \_\_\_\_\_ Date \_\_\_\_\_

Print Student's Name: \_\_\_\_\_ CWID \_\_\_\_\_

\*Warning: If you give false or misleading information on documents submitted to the Office of Financial Aid, you may be fined, be sentenced to jail, or both.