

Verification of Student Enrollment For Use by Independent Students 2014-2015 Academic Year

Name of Marist College Student: _____ Date: _____

CWID Number: _____

The Financial Aid award received by the above named family member attending Marist College was based on information from the family that more than one household member was attending a post-secondary educational institution. The Office of Student Financial Services is responsible for verifying the enrollment status of the child(ren) and/or spouse of the above named Marist College student. Please complete Section A. You should then forward this form to the Financial Aid/ Registrar's Office of that child's or spouse's school for the completion of Section B.

Failure to respond to this request will result in an adjustment to the Marist student's FAFSA, which may result in a substantial increase in the federally calculated Expected Family Contribution (EFC). This change may impact the student's financial aid award. Any required adjustments will be retroactive to disbursements already applied to the student's account.

SECTION A – CHILD OR SPOUSE STATEMENT (Use a separate form for each institution)

_____ is presently attending:
Child or Spouse Name

Name of College or University

Child or Spouse Signature

Date

SECTION B: ENROLLMENT VERIFICATION (To be completed by child's or spouse's school)

The student in Section A is presently enrolled (check one):

Enrollment: _____ Full Time _____ ½ Time or more _____ Less than ½ time
Program Type: _____ Certificate _____ Degree _____ Date of Completion
Dependency Status: _____ Independent _____ Dependent

Or

The student in Section A is:

_____ Not Enrolled _____ Not Matriculated in a Degree/Certificate Granting Program

Signature of Certifying Official

Date

Type or Print Name of Certifying Official