Office Use Only:	
Officer Initials:	



Office of Student Financial Aid Telephone (318) 357-5961 Fax (318) 357-5488 Email nsufinaid@nsula.edu

## 2023-2024 Dependent Household Size Worksheet

ident's Name		Studen	nt Campus Wide ID#
ist the people in your household and	include:		
• Yourself			
• Your parent(s) with whom you			:
<ul> <li>Your parent(s) other children i</li> <li>July 1, 2023 - June 30, 2024, d</li> </ul>			eir support from
• Any other people if they now li	ve with your parents, you	r parents provide more th	han half of their support and your
parents will continue to provid			
Must include a signed statement the age of 24.	of support from any other	people listed in your hou	usehold, including child(ren) over
Also list the college or univers.	ty they will be attending	if they will be enrolled a	t least half time between
July 1, 2023 - June 30, 2024.			
July 1, 2023 - Julie 30, 2024.			
•	formation regarding the	household members an	d/or enrollment in a post-
Note: If NSU believes that the in secondary educational ins		we may require additio	nal documentation.
Note: If NSU believes that the in secondary educational ins		we may require additio Relationship	nal documentation.  College Attending in 2023-2024
Note: If NSU believes that the in secondary educational ins	itution to be inaccurate,	we may require additio	nal documentation.
Note: If NSU believes that the in secondary educational ins	itution to be inaccurate,	we may require additio Relationship	nal documentation.  College Attending in 2023-2024
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Note: If NSU believes that the insecondary educational install Name  RTIFICATION AND SIGNAT  h person signing below certifies that remation was reported on the FAFSA	URE  all of the information remust sign and date and a	Relationship Self  Sorted is complete and cat least one parent must a	Northwestern State University  Porrect. The student whose also sign and date. Warning: If you
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