Creighton
U N I V E R S I T Y

Enrollment Management
Office of Financial Aid

2026-2027 Family Size Verification Worksheet

Student Name_____ **NET ID**_____

Family Information
List the people in your family:

Family Size - Includes the following:
- The student
- The student's parents (if dependent student), even if the student is not living with them. Exclude a parent who has died or is not living in the household because of separation or divorce. Include a parent who is on active duty in the U.S. Armed Forces apart from the family.
- The student's sibling(s) (if dependent student) if the following are true:
    o They live with the student's parents (or live apart because of college enrollment),
    o They receive more than half of their support from the student's parents, and
    o They will continue to receive more than half their support from the student's parents during the award year.
- The student's spouse, if applicable (independent student)
- The student's dependent children, if the following are true:
    o They live with the student (or live apart because of college enrollment);
    o They receive more than half of their support from the student; and
    o They will continue to receive more than half their support from the student during the award year.
- Other persons, if the following are true:
    o They live with the student or parent(s);
    o They receive more than half of their support from the student or parent(s); and
    o They will continue to receive more than half their support from the student or parent(s) during the award year.

The provided criteria for "dependent children" or "other persons" align with the requirement that family size align with whom the student could claim as a dependent on a U.S. tax return if the student were to file a U.S tax return at the time of completing the 2026-2027 FAFSA. As a result, the student should not include any unborn children in the family size. If more space is needed, provide a separate page with the student's name and ID number at the top.

Family Member Full Name	Age	Relationship to Student
1.		**Self**
2.		
3.		
4.		
5.		
6.		

_____   _____
Student Signature   Date

_____   _____
Parent Signature (if dependent student)   Date