SEATTLE PACIFIC UNIVERSITY

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2025-2026 INDEPENDENT FAMILY SIZE

STUDENT NAME: _____ SPU ID: _____

1. As of today, FAMILY SIZE

- [x] List yourself
- [ ] List your spouse, if applicable.
- [ ] List your dependent child(ren) if the following are true:
  - A. They live with you (or live apart because of college enrollment)
  - B. They receive more than half of their support from you; and
  - C. They will continue to receive more than half their support from you during the award year (July 1, 2025, through June 30, 2026)
- [ ] List other persons if the following are true:
  - A. They live with you
  - B. They receive more than half of their support from you; and
  - C. They will continue to receive more than half their support from you during the award year (July 1, 2025, through June 30, 2026)

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 2025-2026 FAFSA. As a result, the student should not include any unborn children in the family size.

Name	Age	Relationship
		Self
		Spouse (if applicable)

2. SIGNATURE

By signing this worksheet, we certify that all the information reported on this worksheet is complete and correct. If the spouse is included in the family size, their signature is also required.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to prison, or both.

Student Signature	Email	Date
Spouse Signature *(if applicable)*	Email	Date