

Student Name: \_\_\_\_\_

Banner ID#: 800 \_\_\_\_\_

2026/27 – V01



**Financial Aid**  
**SUNY BROCKPORT**

### DEPENDENT STUDENT FAMILY SIZE WORKSHEET

Family Size - Includes the following:

- The student.
  
- The student’s parents, 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 siblings 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.
  
- Other persons if the following are true:
  - o They live with the student’s parents,
  - 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.

**\*\*Please Note:** Parents should not include any unborn children in the family size.

<u>FAMILY SIZE</u> NAME (Student and ALL Family Members)	Date of Birth	Relationship to Student
<b>STUDENT</b>		<b>SELF</b>
<b>PARENT (mother/father/step parent)</b> <i>Name:</i>		<b>PARENT</b>
<b>PARENT (mother/father/step parent)</b> <i>Name:</i>		<b>PARENT</b>

### CERTIFICATION

By signing this worksheet, I certify that all the information reported is complete and accurate. False or misleading information on this worksheet may result in the loss of my financial aid and/or a fine/prison sentence or both.

Student's Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent's Signature \_\_\_\_\_

Date \_\_\_\_\_