

Office of Financial Assistance
Phone: (508)793-7478 Fax: (508)793-8802
950 Main Street, Worcester, MA 01610
Prospective Students Submit at apply.clarku.edu/status
Current Students Submit Through CUWeb

2024-2025 Verification Family Size (Dependent Student)

Student Name:		Clark University ID #*:	rk University ID #*:	
Number of Household Members: List	below the	people in the parents	<u>' household</u> . Include:	
 The student. The parents (including a steppare The parents' other children if the 30, 2025, or if the other children 2025. Include children who meet Other people if they now live with continue to provide more than he 	parents w would be i either of n the pare	ill provide more than required to provide pa these standards, even nts and the parents pi	half of the children's support for trental information if they were if a child does not live with the covide more than half of the otl	e completing a FAFSA for 2024 e parents.
Number in College: Include in the spa enrolled at least half time in a degree, between July 1, 2024, and June 30, 20 If more space is needed, provide a sep	diploma, 125, and ir	or certificate progran clude the name of the	n at an eligible postsecondary e e college.	educational institution any time
Full Name	Age	Relationship	College	Will be Enrolled at Least Half Time (Yes or No)
		Self	Clark University	
Note: We may require additional doc members enrolled in eligible postseco				egarding the household
Student's Signature			Date	

Date

Parent's Signature