

Household Size Worksheet 2023-2024

nt ID: W00		-		
Name:		MI:	Last Name:	
of Birth:		Phone:		
			— include yourself, your spouse if you h	
			f their support from July 1, 2023, throu surself; your parent(s) — including step-	_
do not live with them; your provide more than half of the provide parental information	parents' other chill eir support from I n when applying fo a parent, who will	dren, even if the July 1, 2023, thro or federal studen	y don't live with your parent(s), if (a) yough June 30, 2024, or (b) the children we taid. Also write in the name of the colle lege at least half time between July 1, 2	our parents will rould be required ege for any
	na, or certificate p	rogram at an elig	member, excluding the parents, who vible postsecondary educational institut	
Full Name	Age	Relationship (if child, specif son/daughter		Will be Enrol at Least Ha Time (Yes or
Example: John Doe	23	Self	WSU Tech	Yes
postsecondary educational ins	re) certify that a	ll of the informa	ne household members enrolled in e ation reported to qualify for Federal st sign)	
Student signature	Date		Parent signature (if required)	Date

WSU Tech Financial Aid 4004 N. Webb Rd. Wichita, KS 67226 316-677-9400