



24/25 Independent Family Size Form

Student Name _____
(Please Print Clearly)

CFCC ID: _____
(DO NOT LEAVE BLANK)

Number of Household Members: Include **ALL household members** in the chart below. The people in your household should include

- You, the student.
- Your spouse, if married
- The student’s dependent children if the following are true:
 - They live with the student (or live apart because of college enrollment);
 - They receive more than half of their support from the student; and
 - They will continue to receive more than half their support from the student during the award year.
- Other persons if the following are true:
 - They live with the student;
 - They receive more than half of their support from the student; and
 - They will continue to receive more than half their support from the student 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 2024-2025 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 and list the remaining household members.

Full Name	Age	Relationship
		<i>Self</i>

Note: We may require additional documentation if we have reason to believe that the information regarding the household members enrolled in eligible postsecondary educational institutions is not accurate.

Certification and Signatures

Each person signing below certifies that all of the information reported is complete and correct. **Warning -** *If you purposely give false or misleading information you may be fined, be sentenced to jail, or both.*

Student’s Signature
***We cannot accept a typed signature**

Date