2024-2025 VERIFICATION **HOUSEHOLD SIZE INFORMATION**

Please Print and Use Ink - DO NOT LEAVE ANY LINE ON THIS FORM BLANK

	STUL	DENT II	NFORMATION	
Student Name:			SSN/Banner I.D. # (Last Four Only):	
your application with your fine	ancial documents and verific Complete this verification fo	ation forms	tion." In this process, MSU Northern . The law says we have the right to as mit it to the MSU Northern Financial	sk you for this information before
	FAM	IILY IN	FORMATION	
B. If child can answe questions on the FAF ◆ Your parents, if you are d ◆ Your parent's dependent of write the names of all family	clude: , if married re than half their support -Ol r 'No' to all the dependency (SA (Questions 5 & 6) ependent children members including yoursel	R- f. Also writ	half their support from you completed your student aid	our parents) and received more than u (or your parents) at the time you d application AND they will half their support from you (or your 4 through June 30, 2025.
FULL NA	ME A	GE	RELATIONSHIP	COLLEGE
Example: Janet Jones	2	25	Self	MSU Northern
	worksheet, we certify that all the ou purposely give false or mislead	information i	RIZATION reported to qualify for Federal student aid is on on this worksheet, you may be fined, be	
	Student's Signature		Date	
Parent's Signature	Date		Spouse's Signature	Date
	Meli	Nouthoun	Financial Aid Office	

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