

## **Parent – Number in College Worksheet**

Please complete all fields on this form using a black or blue pen. Incomplete forms will be returned and will cause a delay in processing your financial aid application.

Student's APU ID#:		_ Academic Program:	
Student's Name:	Last	First	<i>M.I.</i>

**Why you're being asked to complete this form.** On the Free Application for Federal Student Aid (FAFSA), you (the student) reported the number of people in your parents' household who will be attending college in 2017-18. The government requires Azusa Pacific University (APU) to confirm this information to complete your application for financial aid.

## Who should be listed below:

- Yourself (the student).
- Children and other dependents that your parents financially support, who will be attending college at least half-time (6 units), July1, 2017 June 30, 2018.

Family Member's Name	Relationship to Student	Age	Name of University/College
1.	Self		Azusa Pacific University
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

By signing this form, I affirm that all information on this form and any attachments are complete and accurate to the best of my knowledge. If requested, I agree to provide documentation to support the information I have provided on this form. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment or both, under provisions of the United States Criminal Code.

Student Signature (*Required- No electronic signature*)

Parent Signature (Required- No electronic signature)

Date

Date

MAILING ADDRESS

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