

— Barnes-Jewish College —  
**GOLDFARB SCHOOL of NURSING**  
BJC HealthCare

This form contains Personally Identifiable Information

**2024-2025**  
**Household Size Inquiry for Independent or Dependent Student**

Name: \_\_\_\_\_ Student ID#: A \_\_\_\_\_

In reviewing the documents you have submitted, we have found there is conflicting information between the number of people listed in your household on the FAFSA and the verification worksheet.

**Who can I include as a member of my household?**

Please refer to the chart below, which explains who you may include as members of your and or parent's household in applying for federal student financial aid. Use this definition to complete the household size chart on this form, provide the signatures required in the Certification Statement, and return the form to our office so that we may continue with processing your file.

**Household Size Definition for Dependent Students**

Include in your parents' household: (parent = parents or parent and stepparent)

- Your parents and yourself, even if you do not live with your parents.
- Your parents' other children if your parents will provide more than half of their support from July 1, 2024 through June 30, 2025.
- Other people, if they now live with your parents and your parents provide more than half of their support, **and** your parents will continue to provide more than half of their support from July 1, 2024 through June 30, 2025.
- Any person you support, i.e. child or legal guardian.

**Household Size Definition for Independent Students**

Include in your household:

- Yourself, and your spouse if you have one, and
- Your children, if you will provide more than half of their support from July 1, 2024 through June 30, 2025, even if they do not live with you, and;
- Other people if they now live with you, and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2024 through June 30, 2025.

Name: \_\_\_\_\_ Student ID#: A \_\_\_\_\_

**Household Size**

Instructions: Please complete the chart below, listing the names of the members of your and or parents' household and providing the other information requested.

**Please Note: If you list people who you or your parents cannot claim as exemptions on their U.S. Income Tax Return, you may be asked to provide documentation that shows these people do meet the criteria to be included in household size as outlined in the chart on the front of this form.**

Name	Age	Relationship to You
_____	_____	<b>SELF</b> _____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Comments:**

**Certification Statement for Independent/Dependent Students**

By signing this worksheet, I (we) certify that all the information to qualify for federal financial aid is complete and correct. I understand that giving false or misleading information on this worksheet can result in a fine, jail sentence, or both.

\_\_\_\_\_  
Student Signature and Date

\_\_\_\_\_  
Parents Signature and Date (if Dependent)