

FAMILY SIZE WORKSHEET

2009-2010

STUDENT'S NAME: _____ Student ID # _____

List the people that your parent(s) will support betw between July 1, 2009 and Ji June 30, 2008.

Include: *UVM Student

*Parent(s)

*Parent(s) dependent children (if your parent(s) provide more than half their support or would have to give parental information when applying for aid)

Include other people as part of your family only if:

*they lived with your parent(s) and got more than half their support from your parent(s) at the time you completed your student aid application

*AND they will continue to get more than half their support from July 1, 2011, 2009 through June 30, 2010.

	FIRST NAME OF HOUSEHOLD MEMBER(S)	AGE	RELATIONSHIP TO UVM STUDENT (*)	NAME OF COLLEGE ATTENDING AT LEAST HALF TIME IN 2009-2010 (Do not include parent in college) (**)	CREDITS ENROLLED FALL 2009	CREDITS ENROLLED SPRING 2010	WILL PARENT(S) PROVIDE MORE THAN 1/2 SUPPORT IN 2009	2008 INCOME EARNED
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

* If other than the student's parent, stepparent, brother, sister, student's spouse or child, explain:

** If the family member is undecided about a college choice, list the first choice.

STUDENT SIGNATURE REQUIRED. DEPENDENT STUDENTS MUST HAVE AT LEAST ONE PARENT SIGN THIS FORM.

Student's Signature: _____
 Student's Spouse's Signature: _____
 Mother or Stepmother's Signature: _____
 Father or Stepfather's Signature: _____
 Daytime Phone #: _____

Date: _____
 Date: _____
 Date: _____
 Date: _____
 Email Address: s: _____

Please return to: University of Vermont
 Student Financial Services
 221 Waterman Building
 Burlington, VT 05405
 FAX (802) 656-4076