Once completed upload financial aid documents at [https://onbase.csus.edu/unity/forms/faupload.aspx](https://onbase.csus.edu/unity/forms/faupload.aspx)

California State University, Sacramento  
Student Services Center  
Financial Aid & Scholarships Office  
Lassen Hall  
6000 J Street, Sacramento, CA 95819-6044  
Phone: (916) 278-1000

**PARENT HOUSEHOLD SIZE AND NUMBER IN COLLEGE VERIFICATION**

In the box below, list ALL members in your parents’ household who meet the following requirement. Complete the college section for those attending college.

- **Whom to list in the Household:**
  1. You (the student) and your parents (including stepparent)
  2. Your parents’ other children, if
     - Your parents will provide more than half of their support between July 1, 2021, and June 30, 2022 OR the children would be required to provide parent information if they were to file a Financial Aid Application
     - Include children who meet either of these standards, even if the child does not live with the parents
  3. Other individuals may be included in your parents’ household if
     - They live with your parents NOW and your parents provide more than half of their support
     - AND they WILL CONTINUE to live with your parents and your parents will continue to provide more than half of their support between July 1, 2021, through June 30, 2022

- **Include college information:**
  Include college information about any household member below who is, or will be, enrolled at least half-time in a degree, diploma, or certificate program at an eligible postsecondary institution any time between July 1, 2021, and June 30, 2022.

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Age</th>
<th>Relationship To Student</th>
<th>College Name (list full name of college) If Attending</th>
<th>Enrolled at Least Half-Time</th>
<th>Sac State ID# If Attending</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: Martha Jones</td>
<td>22</td>
<td>Sister</td>
<td>Sac State</td>
<td>Yes</td>
<td>123456789</td>
</tr>
</tbody>
</table>

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**CERTIFICATION STATEMENT**

Each person signing below certifies that all of the information reported is complete and correct. The student and one parent whose information was reported on the financial aid application must sign and date. (Typed signature is not acceptable)

Student Signature __________________________ Date __________

Parent Signature __________________________ Date __________

Rev. 10/16/20