



Office of Student Financial Services
3800 Victory Parkway, Cincinnati, OH 45207-5111
Email: xufinaid@xavier.edu
Fax: 513-745-2806

2024-2025 Verification of Family Size

Your application for federal financial aid has been selected for review in a process called *verification*. Verification is the process used by the U.S. Department of Education to confirm that the data reported on your FAFSA form is accurate. Please review our website at www.xavier.edu/verification to learn more about this federal requirement. Financial aid offers for current/returning students will not be generated until verification is finalized. **Federal aid will not be disbursed for students who have not completed verification.** *Please provide the required verification documents by June 15.*

INSTRUCTIONS: Please complete the table on page 2 of this document by listing all family members according to your dependency status as determined when you completed your 2024-2025 FAFSA form. If you are uncertain of your dependency status, please contact our office for assistance.

Dependent Students

1. List yourself as the first family member.
2. List your parents who were required to provide information for your 2024-2025 FAFSA form. Exclude a parent who has died or is not living in the household because of separation or divorce. Include a parent who is on active duty in the U.S. Armed Forces and apart from the family for that reason.
3. List your siblings if ALL of the following are true:
 - a. They live with your parents (or live apart because of college enrollment),
 - b. They receive more than half of their support from your parents, and
 - c. They will continue to receive more than half their support from your parents through June 30, 2025.
4. List other people if ALL of the following are true:
 - a. They live with your parents,
 - b. They receive more than half of their support from your parents, and
 - c. They will continue to receive more than half their support from your parents through June 30, 2025.

Independent Students

1. List yourself as the first family member, and then list your spouse (if you are married). Exclude a spouse who has died or is not living in the household because of separation or divorce.
2. List your children if ALL of the following are true:
 - a. They live with you (or live apart because of college enrollment),
 - b. They receive more than half of their support from you, and
 - c. They will continue to receive more than half their support from you through June 30, 2025.
3. List other people if ALL of the following are true:
 - a. They live with you,
 - b. They receive more than half of their support from you, and
 - c. They will continue to receive more than half their support from you through June 30, 2025.



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 Student's Last Name First Name M.I. Xavier ID Number

List all family members according to your dependency status as determined when you completed the 2024-2025 FAFSA form. Please see the previous page for clarification regarding family members. If more space is needed, please provide a separate page with your name and Xavier ID number at the top.

First and Last Name	Age	Relationship to Student
		<i>Self</i>

Certification

Each person signing below certifies that all the information reported on this worksheet is complete and correct. If dependent, one parent whose information was reported on the FAFSA must sign. **Warning:** If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

 Student's Signature (required)

 Date

 Parent's Signature (required for dependent students)

 Date

This form must be signed. We cannot accept typed or electronic signatures.

For Office Use Only	
ISIR # Reviewed _____	Unchanged FTI (\$) ? Yes or No
Manual Family Size _____	Verified Family Size _____