

Your application for need-based financial aid contains incomplete, inconsistent, and/or unclear household information. Please complete the table below, **using the data that was correct as of the date you completed and signed your Free Application for Federal Student Aid (FAFSA)**, and return this form to the Student Financial Aid office. Wake Forest will use the responses you provide on this form to make a decision regarding demonstrated need and to make any necessary corrections in the calculation of federal program eligibility.

The instructions below correspond to the federal definition of household size and number in college. The people you list in this table **MUST** be eligible for inclusion under the federal definition. *The federal definition of "parent" includes only the primary residential parent and that parent's current spouse. In case of separation or divorce of natural parents, the secondary household parent is not to be listed in the table.*

In the chart below include the **Full Name, Age, and Relationship** of:

- **Self**
- The parent with whom you lived most during the past year (primary residential parent) and step-parent.
 - Do not include your secondary household parent, if any.
 - Your primary residential parent's other children if your primary residential parent will provide more than half of their support from July 1, 2019, through June 30, 2020 or if the other children would be required to provide parental information for completing a FAFSA for 2019-2020.
- **Other people** only if they now live with your primary residential parent and your parent will provide more than half of their support from July 1, 2019, through June 30, 2020.

List all members of your household below, based on the definitions above. Include the **Name of College, Undergraduate/Graduate Level, and Half-Time/Full-Time** status for those **siblings** attending at least half-time during 2019-2020 in a program leading to a degree, diploma, or certificate. List all household members, but include college information for siblings only.

Full Name Of Household Member	Age	Relationship	Name Of College	Undergraduate/Graduate Level	Half-Time/Full-Time
		Self	Wake Forest University		

I certify that the information reported on this form is correct and complete to the best of my knowledge.

Student's Printed Name

Student's WFU ID#

Student's Email Address

Student's Signature

Date Signed

Parent's Signature

Date Signed

Parent's Email Address