

Student's Name \_\_\_\_\_ SFID#: \_\_\_\_\_

**HOUSEHOLD MEMBERS**

<p align="center"><b>INCLUDE:</b></p> <ul style="list-style-type: none"> <li>Your Parent <u>USED ON THE FAFSA AND THEIR SPOUSE</u> (Biological or <u>Step</u> Parent)</li> <li>All siblings (biological, half, or step) 23 years old or younger <i>even if they do not physically reside with your parents</i></li> </ul>	<p align="center"><b>DO NOT INCLUDE:</b></p> <ul style="list-style-type: none"> <li>Boyfriend</li> <li>Girlfriend</li> <li>Fiancé(e)</li> <li>Friends</li> <li>Grandparents</li> <li>Siblings who are married</li> <li>Siblings over the age of 23</li> <li>Foster siblings</li> <li>Other <u>NON-MARRIED</u> Partner(s) or Relation</li> </ul>
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FULL NAME (FIRST, MIDDLE, AND LAST NAME)	AGE	RELATIONSHIP TO STUDENT
STUDENT:		STUDENT/SELF
PARENT 1:		PARENT
PARENT 2 (If applicable):		PARENT

**HOUSEHOLD MEMBERS IN COLLEGE**

Please indicate below anyone in your household above who will be attending an **accredited postsecondary institution** for a **degree or a certificate program, at least half-time anytime between JULY 1<sup>st</sup>, 2018 to JUNE 30<sup>th</sup>, 2019.**

NAME OF STUDENT	COLLEGE/UNIVERSITY	SFID IF AT SANTA FE
STUDENT:	SANTA FE COLLEGE	

If you need additional space for either section above, please use the back of this form and check here →

**I certify all information reported on this form is complete and correct. I understand that if I purposefully give false or misleading information, I may be fined, sentenced to jail, or both.**

**NO TYPED SIGNATURES WILL BE ACCEPTED**

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

SANTA FE COLLEGE • FINANCIAL AID OFFICE

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For more information, visit [sfcollge.edu/eao](http://sfcollge.edu/eao) or contact [equity.officer@sfcollge.edu](mailto:equity.officer@sfcollge.edu).