



**2025-2026**  
**Family Size for Independent Students**

Student Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

Fill in the below information so we may verify the family size you listed on your FAFSA.

1. List yourself (the student):

Student's Name	Student's Age

2. List your spouse if you are married:

Spouse's Name	Spouse's Age

3. List your children or other people that live with you and received/will continue to receive more than half of their financial support from you during the award year. These individuals must be eligible to be claimed as dependents on your tax return:

Full Name	Age	Relationship to Student

Each person signing below certifies that all the information reported is complete and correct.

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Spouse Name: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse Signature: \_\_\_\_\_

Email documents to [finaid@mountunion.edu](mailto:finaid@mountunion.edu)

Mail to the Office of Student Financial Aid, 1972 Clark Ave, Alliance, OH 44601

Fax documents M-F 8-4 to (330) 829-2814

*Please do not send any personally identifiable information via email (e.g. Social Security Numbers, dates of birth, etc.).*

Questions? Contact the Office of Student Financial Aid

(330) 823-2674 [finaid@mountunion.edu](mailto:finaid@mountunion.edu)