

Please contact our office if you need assistance completing this form.

CF23IHHC
Independent Student

Suffolk University

• Office of Student Financial Services • 73 Tremont Street • Boston, MA 02108
617-573-8470 • 617-720-3579 (fax)

**2023 – 2024 Household Size/Number in College Worksheet
Independent Student**

Student’s Name _____ **Student ID** _____

In order to verify the information reported on your FAFSA regarding household size and/or number in college for the 2023-2024 academic year, please complete the ‘**Household Member Information**’ Table below.

As an ‘Independent Student’ please include the following on the table below:

- Yourself (we have already included you on the table below. Please just indicate your age.)
Also include:
 - Your spouse, if you are married.
 - Your children if you will provide at least 50% of their support from July 1, 2023 to June 30, 2024.
 - Other individuals who now live with you, receive at least 50% of their support from you, and will continue to receive support through June 30, 2024.

Household Member Information

<i>Full Name</i>	<i>Age</i>	<i>Relationship to the student</i>	<i>Will this household member attend college during 2023-24? Answer YES or NO</i>	<i>If YES, list the name of the college or university this household member will attend. (Household member must be enrolled at least half time in a degree, diploma or certificate program any time between 7/1/23-6/30/24.)</i>

Student’s signature: _____ **Date:** _____
(Student must sign, electronic signature is not acceptable.)