

Student Name: _____ BGSU ID: _____

You were mailed this form to help clarify a conflict regarding information you reported or left blank on the Free Application for Federal Student Aid (FAFSA). The U. S. Department of Education requires the resolution of conflicting information, therefore, complete this worksheet and return it to the address listed at the end of this form so the processing your federal financial aid application can be completed.

If you are considered to be a Dependent student for financial aid purposes please complete Section A.

If you are considered to be an Independent student for financial aid purposes please complete Section B.

A. DEPENDENT STUDENT FAMILY INFORMATIONList the people in your *parent(s)*' household, including:

- yourself and your parent(s) (including stepparents) even if you don't live with your parents, and
- your parents' other children, even if they don't live with your parent(s), if (a) your parents will provide more than half of their support from July 1, 2009 through June 30, 2010, or (b) the children would be required to provide parental information when applying for Federal Student Aid, and
- other people if they now live with your parent(s), and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2009 through June 30, 2010.

Write the names of all household members in the spaces below. Also write in the name of the college for any household member, excluding your parent(s), who will be attending at least half time between July 1, 2009 and June 30, 2010, and will be enrolled in a degree, diploma, or certificate program. If you need more space, attach a separate page.

Full Name	Age	Relationship to BGSU Student	College Attending
<i>Missy Jones</i> (example)	<i>16</i>	<i>sister</i>	<i>n/a</i>
		Self	

Please check the appropriate marital status for the parent(s) whose financial information is provided on your FAFSA. Your parents' marital status as of the day your FAFSA was filed is:

____ Single ____ Married/Remarried ____ Separated ____ Divorced ____ Widowed

NOTE: You cannot change your parents' marital status after filing the FAFSA. If your parents' marital status changed after you filed the FAFSA you will need to complete a Special Consideration Application, available to download and print from the SFA home page at www.bgsu.edu/offices/sfa.

B. INDEPENDENT STUDENT FAMILY INFORMATION

List the people in *your household*, including:

- yourself, and your spouse if you have one, and
- your children, if you will provide more than half of their support from July 1, 2009 through June 30, 2010, even if they do not live with you, and;
- other people if they now live with you, and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2009 through June 30, 2010.

Write the names of all household members in the spaces below. Also write in the name of the college for any household member who will be attending at least half time between July 1, 2009 and June 30, 2010, and will be enrolled in a degree, diploma, or certificate program. If you need more space, attach a separate page.

Full Name	Age	Relationship to BGSU Student	College Attending
<i>Kate Jones</i> (example)	<i>16</i>	<i>wife</i>	<i>City University</i>
		Self	

Please check your marital status as of the day you filed the FAFSA.

Single Married/Remarried Separated Divorced Widowed

NOTE: If your marital status changed after you filed the FAFSA you will need to complete a Special Consideration Application, available to download and print from the SFA home page at www.bgsu.edu/offices/sfa. (If you were a Dependent student when you filed the FAFSA you may not change your marital status from Single to Married until the next academic year.)

C. SIGN THIS WORKSHEET

Each person signing this form certifies that all the information reported on it is complete and correct. If dependent at least one parent must provide a signature and date.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student Date

Parent Date

Mail this worksheet to:

Bowling Green State University, Student Financial Aid, 231 Administration Building, Bowling Green, Ohio 43403-0114

Faxed copies are accepted and may be faxed to 419-372-0404

If you need assistance completing this form you may contact a financial aid advisor by calling 419-372-2651, M-F, 8:00 am – 5:00 pm.