

202 v-202 wInd‡'‡•†‡•– Family Size Verification Form

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Ckf"Ugtxkegu"htq"rtqeguukpi

A. Student & Spouse (*if applicable*) Information

Student's Full Name: _____ Moravian ID: _____

Spouse's Full Name : _____

Spouse's Email Address : _____

B. Family Members

Report information below as it applies to your family size D Q W L P H H W Z M B Q D Q-G Q H S Family size will i Q F O X G H:

- The student
 - The student's V S R X ~~V D H S~~ S I O L F D E O H
 - The student's G H S H Q G H Q W F K L O G U H Q
 - Other persons*

* , Q F C H E S H Q F G K H L O V D Q R B V A K S H H W V 2 R I Q V ,) W K R O O R Z L Q J L V W U X H

- x They live with the student (or live apart because of college enrollment)
 - x They receive more than half of their support from the student

X 7KH\ ZLOO FRQWLQXH WR UHFHL

X - WWW.E2E00.FR/QUEQUOI.WR.COM/WHAT/FRONT.WRDQ.RDQT.RT/WRITES.VX/SCREEN

C. Certification and Signatures

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

Student Signature Required (no typed signature permitted) _____ Date _____

Date