



State Grant and Special Programs
Phone: 1-800-692-7392 Fax: 717-720-3786
P.O. Box 8157, Harrisburg, PA 17105-8157

2017-18 FAMILY SIZE AND NUMBER ENROLLED CLARIFICATION FORM
(DEPENDENT STUDENT)

(NOTE: Deadline for returning this form and 2015 tax documents to PHEAA is April 1, 2018.)

Print Student's Name

Student's Account Number grid

Student's Account Number

OR

Student's Social Security Number grid

Student's Social Security Number

2017-18

The Pennsylvania Higher Education Assistance Agency (PHEAA) requires additional information concerning the number of people in your family's household and/or the number of family members enrolled in college. Therefore, you and your parent(s)/stepparent are requested to complete and sign this form. Additionally, PHEAA REQUIRES A COMPLETE COPY OF THE 2015 U.S. INCOME TAX RETURN THAT YOUR PARENT(S)/STEPPARENT FILED WITH THE IRS IF SUCH HAS NOT BEEN PREVIOUSLY SUBMITTED. THIS INCLUDES ALL OF THE SUPPORTING FORMS AND SCHEDULES, AND ALL 2015 WAGE AND TAX STATEMENTS (W-2 FORMS). EACH W-2 FORM SHOULD CONTAIN FIGURES IN BOX 1 AND EITHER BOX 16 OR BOX 18. IF YOUR PARENT(S)/STEPPARENT HAVE AN INTEREST IN A CORPORATION AND/OR PARTNERSHIP, YOU ALSO NEED TO SUBMIT COPIES OF THE APPROPRIATE U.S. PARTNERSHIP AND/OR CORPORATION TAX RETURN(S), INCLUDING THE COMPLETED BALANCE SHEET(S) AND K-1 SCHEDULE(S). If your family owns and controls more than 50% of a business and has 100 or less full-time or full-time equivalent employees, please indicate such with the correspondence you are sending. YOU MAY HAVE ALREADY SUBMITTED TAX DOCUMENTS TO YOUR SCHOOL, BUT PHEAA REQUIRES A COPY AS WELL. THIS INFORMATION AND THE COMPLETED FORM SHOULD BE SENT TO PHEAA, P.O. BOX 8157, HARRISBURG, PA 17105-8157 WITHIN 30 DAYS. If you have questions concerning this matter, please contact Agency staff toll-free at 1-800-692-7392 (TTY: Dial 711 for hearing impaired).

- 1. List each person, and their relationship to your parent(s)/stepparent, that your parent(s)/stepparent will support between July 1, 2017 and June 30, 2018. Include your parent(s)/stepparent and yourself. Include your parent(s)/stepparent's other children if they receive more than half of their support from your parent(s)/stepparent or if they would be required to provide your parent(s)/stepparent's information when applying for Title IV Federal Student Aid. Include other people only if they now live with and receive more than half of their support from your parent(s)/stepparent and will continue to receive more than half of their support from July 1, 2017 through June 30, 2018. Do NOT include any children for whom child support paid has been reported.

Please note that in order for your parent/stepparent to claim that they are providing more than half of someone's support, they must be able to demonstrate that the direct support they provide is greater than the personal resources of the individual listed in the household size. Relevant definitions include:

Direct support represents both in-kind support such as free/reduced rent, utilities, medical and dental care, payment of college costs or other services in addition to actual cash assistance.

Individual personal resources include both taxable and untaxable income such as wages, unemployment compensation, retirement income/distributions, dividend and investment earnings, Social Security benefits, disability payments, and other sources of income.

Table with 3 columns: Full Name, Age, Relationship to Student



2. List each person from question 1, including yourself, but excluding your parent(s)/stepparent, who will be a college student between July 1, 2017 and June 30, 2018. Include only students enrolled at least half-time (defined as at least 6 semester credit hours, 12 clock hours per week, etc.) in a program that leads to a college degree or certificate. If another household member is enrolled, **you must provide verification of this student's enrollment.** Otherwise the Agency will be unable to consider this student as being enrolled.

a. _____
Name Social Security Number or Account Number

_____ College or School _____
Dates Enrolled Between
July 1, 2017 and June 30, 2018

b. _____
Name Social Security Number or Account Number

_____ College or School _____
Dates Enrolled Between
July 1, 2017 and June 30, 2018

c. _____
Name Social Security Number or Account Number

_____ College or School _____
Dates Enrolled Between
July 1, 2017 and June 30, 2018

3. If the total size of your parent(s)/stepparent's household exceeds the number of exemptions which your parent(s)/stepparent claimed on their 2015 U.S. Income Tax Return, provide an explanation for the difference. If your parent(s)/stepparent has included their child over the age of 23 or someone other than their child or themselves in the answer to question 1 and they did not claim them as an exemption, they should indicate how much direct support they have/will be providing for them from July 1, 2017 to June 30, 2018 and an approximate value of the other person's own personal resources.

Remember to submit the 2015 tax information as requested in the beginning of the form, complete all questions and make sure that the form contains a parental signature. Failure to follow this instruction will result in the form being returned to you and will delay the completion of the review.

THE PENALTY FOR SUBMISSION OF FRAUDULENT INFORMATION ON THIS FORM MAY BE REPAYMENT OF TRIPLE ANY AMOUNT OF MONEY RECEIVED PLUS A FINE AND/OR IMPRISONMENT.

Signature of Parent (or Stepparent) Date

Signature of Student Date

