

2026-27 Academic Year

Date

Family Size Verification – Independent Student

Please print, complete, sign, and submit this form.

Spouse Signature (if married)

Student's Name (First, MI, Last)	Studen	Student's Cornell ID Number	
tep 2 - Family Size			
Carefully read the following instructions, and in the table below, rep	oort information for		
The student.			
The student's spouse, if applicable.			
 The student's dependent children if all of the following are true: o They live with the student (or live apart because of college of their support from the student of the studen	nt; and	g the award year.	
 Other persons if the following are true: O They live with the student; O They receive more than half of their support from the student. 		a the owerd vers	
O They will continue to receive more than half their support from The provided criteria for "dependent children" or "other persons" mirror student could claim as a dependent on a U.S. tax return if the student the 2026-2027 FAFSA. As a result, the student should not include any	the requirement that were to file a U.S ta	t family size align with those x return at the time of comp	
If more space is needed, provide a separate page with the	student's name a	nd ID number at the top.	
Full Name	Age	Relationship	
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Step 3 – Certification Each person signing below certifies that all of the verification documer and correct. A handwritten signature, not typed, is required:		Self	
Step 3 – Certification Each person signing below certifies that all of the verification documen		Self	