

Household Size Confirmation

Please Return To:

Office of Financial Assistance Dropbox

https://www1.villanova.edu/university/office-of-financial-assistance/contact-us/dropbox-and-important-forms.html

Villanova University Student ID Number:

Parent Completing This Form:		Custodial Parer	nt Non-			
The information provided on a household size and/or number			•	-	ation related to th	e
In the chart below please inclu •Yourself •Your parent(s) (including ste		t); do not include y	our non-custodial parent	unless the form is	being requested f	rom the Non-Custodial
Parent •Your parent(s)' other depend their support from July 1, 20 •Provide college information is leading to a degree, diploma, •DO NOT LEAVE ANY SEC	25 throus for hous or certif	ugh June 30, 2026 sehold members cu icate	rrently enrolled at least h	. ,, .		
Full Name	Age	Relationship	Name of College	Undergrad/ Graduate	Full-Time/ Half- Time/Less Than Half-Time	Expected Graduation Date (Month and Year)
Student's Name:		Self	Villanova University			
			-			
Student's Signature: Parent's Signature:				Date:		

Student's Name: