

## **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

Student's Name: Student ID Number:

Villanova University

Parent Completing This Fori	m:	Custodial Parei	nt Non	-Custodial Parent		
The information provided or household size and/or number			•	-	ation related to th	e
In the chart below please inc •Yourself	elude:					
•Your parent(s) (including st Parent	tep-paren	t); do not include y	our non-custodial parent	unless the form is	being requested f	rom the Non-Custodial
•Your parent(s)' other depentheir support from July 1, 2 •Provide college information leading to a degree, diploma •DO NOT LEAVE ANY SI	2026 thrown for hous , or certif	ugh June 30, 2027 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:				_Date:		
Parent's Signature:				Date:		