



SPOUSE'S SIGNATURE (IF APPLICABLE)

The information requested on this form is n it to the address above within 30 days. All so				
				plete this form and return
Student's Name (Last, First, M.I.)		RMU ID Number (required) Email Address		
Section A: Household Information (if	household	includes more than six fa	amily members, continue	e list on reverse side
 A Dependent Student: Complete 2019-2020, as reported on the page 2 before completing this for a lindependent Student: Complete 2019-2020, as reported on the page 2 before completing this for a lindependent Student. 	Free Applications. The steet of the information of the steet of the information of the steet of	ation for Federal Student A	aid (FAFSA). See "Note to D to the number of people ir	ependent Students" on your household for
Full names of ALL family members (including parents) receiving 50% of parental support if dependent. If independent include yourself and family members in your household that you are supporting more than 50% (including spouse if applicable)	AGE	Relationship to Student:	Will he/she be enrolled in a degree program at a college/university at least half-time in 2019-2020?*	Name of college/university (if applicable)
, , , , ,		SELF	□ Yes □ No	Robert Morris University Illinois
			□ Yes □ No	
			□ Yes □ No	
			□ Yes □ No	
			□ Yes □ No	
			□ Yes □ No	
*If you have <u>parents</u> attending college of DO NOT list them as enrolled in college Section B - Certification and Authoriza Do <u>NOT</u> submit without <u>ALL</u> required signature (we) certify that the information provided of the information provided requires changes.	for the pur tion res.	poses of this form.		
STUDENT'S SIGNATURE	DATE	PARENT'S SIG	NATURE	DATE

DATE

Note to Dependent Students:

To determine who is considered a parent for purposes of this form (note that grandparents, foster parents, and legal guardians are <u>not</u> considered parents on this form unless they have legally adopted you):

- If your parents are both living together (unmarried or married), include them both in the household listing and base questionnaire on their household
- If your parents are divorced or separated, only include in the household listing the parent you lived with more during
 the past 12 months and base the questionnaire on his/her household. PLEASE NOTE: If your parent is remarried as of
 the day you completed your FAFSA, you <u>must</u> include your stepparent in the household listing.
- If parent is widowed or single, include this parent in the household listing and base this questionnaire on his/her household. If your widowed parent is remarried as of the day you completed your FAFSA, include the parent and stepparent.

Whom to include from your parents' household (in Section A of this form):

- Yourself and your parents (including your stepparent; see above), even if you do not live with your parents; and
- Your parents' other children, even if they don't live with your parents, if:
 - a. Your parents will provide more than half of their support from July 1, 2019 to June 30, 2020, or
 - b. The children would be required to provide parental information when applying for federal student financial aid; and
- Other people if they now live with your parents, your parents will provide more than half of their support <u>AND</u> will continue to provide more than half of their support from July 1, 2019 to June 30, 2020.

Note to Independent Students:

Whom to include in your household (in Section A of this form):

- Yourself and, if you are married, your spouse; and
- Your children, if you will provide more than half of their support from July 1, 2019 to June 30, 2020 (also include any unborn children who will be born between July 1, 2019 and June 30, 2020); and
- Other people if they now live with you, you provide more than half of their support, <u>AND</u> you will continue to provide more than half of their support from July 1, 2019 and June 30, 2020.