



# Office of Financial Aid

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## 2024-2025 VERIFICATION WORKSHEET

### Parent Family Size Worksheet

Below, please list the name, relationship to you, and age of all members of your parents' family. Members of your parents' family include you, the student; your parent(s); your sibling(s), if your parent(s) are going to provide more than half of their support during **the entire academic year** (July 1, 2024 - June 30, 2025); and any other persons who **live with** and will be receiving more than half of their financial support from your parent(s) for **the entire academic year**. Do **not** include a parent who does not live in the household due to a separation or divorce.

Once we have received all requested documents on your To Do List, please allow our office up to 3 weeks to review and process the documents submitted.

Student Information		
Name (Last, First, Middle Initial)		
UTD ID		
First and Last Name	Relationship to Student	Age
Student:	Self	
Signature and Certification		
Each person signing this worksheet certifies that all of the information provided above is complete and correct.		
Student Signature: _____		Date: _____
Parent Signature: _____		Date: _____
Please submit your completed worksheet with handwritten (not typed) signatures to the Financial Aid Uploader tool at: <a href="https://finaid.utdallas.edu/forms">https://finaid.utdallas.edu/forms</a>		

With few exceptions, you are entitled on your request to be informed about the information UTD collects about you. Under Sections 552.021 and 552.023 of the Texas Government Code, you are entitled to receive and review the information. Under Section 559.004 of the Texas Government Code, you are entitled to have UTD correct information about you that is held by us and that is incorrect.