



**Verification of Family Member Enrollment 2011-2012**

This form must be completed for each family member reported to be in college on your FAFSA. In order for the family member to be considered, the family member must be enrolled at least half-time in a degree or certificate program at a post-secondary institution eligible to receive federal funds. In addition, siblings must be considered dependent for financial aid purposes at their institution. Notify our office of any changes to the education plans of family members who were initially reported as in school as adjustments to financial aid eligibility may be necessary.

Please complete the CCSJ student and family member sections and have the financial aid office at the family member's institution complete the enrollment verification section and return the form to our office.

**CCSJ STUDENT**

CCSJ Student Name: \_\_\_\_\_ CCSJ ID: \_\_\_\_\_

**FAMILY MEMBER**

Relationship to CCSJ Student (please check one)  Sibling  Spouse  Dependent Child

Family Member Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

College/university the family member will attend in 2011-2012: \_\_\_\_\_

I authorize the above named college/university financial aid office to release the following information to Calumet College of St. Joseph.

\_\_\_\_\_  
(Family Member Signature) (Date)

**ENROLLMENT VERIFICATION  
(TO BE COMPLETED BY THE FINANCIAL AID OFFICE AT THE FAMILY MEMBER'S INSTITUTION)**

Program:  Degree Certificate  Non-Degree

Degree Level:

Undergraduate receiving aid as:  Independent  Dependent

Not an aid applicant

Graduate student

Enrollment Status:  Full Time  1/2 Time  Less than 1/2 Time

Anticipated Graduation Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Financial Aid Officer) (Date)

\_\_\_\_\_  
(Type/Print Name and Title of Financial Aid Officer) (Phone No.)