

## Office of Financial Aid

Sumner Hall | 333 N College Way, Claremont CA 91711 Financial.aid@pomona.edu | 909-621-8205 | 909-607-9842 (fax)

## 2023-24 Verification of Family Enrollment

Your financial aid application indicated that more than one student in your household is or will be enrolled in college/university. Only individuals included in your household (excluding parents) and who are or will be enrolled at least half time in a program leading to a degree/diploma/certificate during the 2023-24 academic year may be included in the number in college. These students must also receive at least 50% of their support from your parents to be included in the household.

Please have an official from the Financial Aid Office or the Registrar's Office of your family member's institution complete and return this form no later than October 14, 2023. The Pomona student's financial aid will be impacted if their family member's enrollment cannot be verified or if the family member is not enrolled at least half-time.

Pomor	na College Stude	ent Information:		
First Name		Last Name		Student ID
Family	Member Informa	ation:		
First Name		Last Name		Student ID
By sigi	ning below, I gra	nt my postsecondary institution p	permission to release this information	on:
Signature of Family Member				Date
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inis se	ection must be co	ompleted by an official at the fami	ily member's postsecondary institut	tion
Name o	of Institution			Title IV School Code
1.	Period(s) of Er	nrollment (any time during 07/01/2	023 to 06/30/2024):	
	□ Summer (Beg	ginning July 2023) □Fall 2023	□Winter 2024 □Spring 2024	
2.	Expected Date	of Graduation:		
3.	The above-nar	ned student is currently enrolled:		
	□ Full-time	☐Half-time or more	□Less than half-time	□Not enrolled
4.	The above-nar	ned student is considered:		
	□ An undergraduate		□A graduate	
		□ Dependent	□Independent	
5.	Total cost of a	ttendance for 2023-24:		_
School Official Printed Name			Office/Department	
Title			Phone Number	
Authorized Signature			Date	