



Pepperdine University, Seaver College

Office of Financial Assistance

2014-2015 Sibling Enrollment

Your 2014–2015 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law states that during the verification process, we may ask you to confirm the information that you reported on your FAFSA. We will compare your FAFSA data to the information provided on this worksheet and to any other required documents. If there are differences, your FAFSA information may need to be corrected. You must complete and sign this worksheet, as well as attach any required documentation and return to the Office of Financial Assistance.

A. Student Information:

Student Name: _____ CWID#: _____
Last First M.I.

Student's: _____ (_____) _____
Date of Birth Email Address Home or Cell Phone Number

B. Sibling/Spouse (If Applicable) Enrollment:

DEPENDENT STUDENTS ONLY:

I <u>WILL NOT</u> have any siblings enrolled in college during the 2014-2015 academic year.	<input type="checkbox"/>
I <u>WILL</u> have one or more siblings enrolled in college at least half time during the 2014-2015 academic year. (please complete the section below)	<input type="checkbox"/>

INDEPENDENT STUDENTS ONLY:

I <u>WILL NOT</u> have a spouse enrolled in college during the 2014-2015 academic year.	<input type="checkbox"/>
I <u>WILL</u> have a spouse enrolled in college at least half time during the 2014-2015 academic year. (please complete the section below)	<input type="checkbox"/>

Number in College: Include below information about any household member, excluding parents, who will be enrolled at least half-time, in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2014 and June 30, 2015. Include the name of the college. **NOTE: We may require additional documentation if we have reason to believe that the information regarding the household members is inaccurate.**

Sibling's/Spouse's Name	Name of Institution	Units Enrolled
<i>Marty Jones(example)</i>	<i>Central University</i>	<i>12</i>

Return To:
 Pepperdine University • Seaver College • Office of Financial Assistance
 24255 Pacific Coast Highway • Malibu • California • 90263-4301 • Phone (310) 506-4301 • Fax (310) 506-4746
 Email: finaid2@pepperdine.edu

C. Certification and Signature

I/we certify that all of the information reported on this worksheet is complete and correct. Each person signing this worksheet certifies that all of the information reported on it is complete and correct. A parent must sign and date if the student is dependent. The student **must** sign this worksheet.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student's Signature

Date

Parent's Signature (Dependent Students Only)

Date

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