

2025-2026 Family Size (Dependent Student)

Please use black or blue ink while filling out this form.

The law says that before awarding Federal Student Aid, we may ask to confirm the information you and your parents reported on your FAFSA. To verify that you provided correct information the financial aid administrator at your school will compare your FAFSA with the information on this form and with any other required documents. If there are differences, your FAFSA information may need to be corrected. You and at least one parent must complete and sign this form, attach any required documents, and submit the form and other required documents to the financial aid administrator at your school. Your school may ask for additional information. If you have questions about verification, contact your financial aid administrator as soon as possible so that your financial aid will not be delayed.

A. Student Information								
Student's Last Name	Student's First Name	Student's M.I.	Student's LMU ID Number					
Student's Street Address (include		Student's Date of Birth						
City	State	Zipcode	Student's Email Address					
Student's Home Phone Number	(include area code)		Student's Alternative Cell Phone Number					

B. Number of Family Members

List below the people in the parent's household. Include:

- The student.
- · The parents (including stepparents) even if the student does not live with the parents.
- The parents' other children, if the parents will provide more than half of the children's support from July 1, 2026, through June 30, 2026, or if the other children would be required to provide parental information if they were completing a FAFSA for 2025-2026. Include children who meet either of these standards, even if the children do not live with the parents.
- Other people, if they now live with the parents, and the parents provide more than half of the other people's support and will continue to provide more than half of their support through June 30, 2026.

If more space is needed, provide a separate page with the student's name and ID number at the top.

Full Name	Age	Relationship		
		Self		



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Studei	it Name		LIVIO ID						
Each pe	cations and Signatures erson signing below certifies thated is complete and correct. The information was reported on the	WARNING: If you purposely give false or misleading information you may be fined, sentenced to jail, or both.							
		ı digital signature on this form. Plec or by mail. All forms must be legible			oy hand,	and retur	n it to	our	
Print St	udent's Name								
Studen	t's Signature	_	Date						
Print Pa	arent's Name								
Parent'	s Signature		Date						
Mail: Phone	LMU Financial Aid 1 LMU Drive, Suite 270 Los Angeles, CA 90045 : 310.338.2753	The Department of Education redocuments containing personally information (PII) must be transmeans. This form cannot be submay mail or fax this form to the anumber listed to the left, or you PDF through our Secure Upload	quires that videntifiable itted through secure nitted via email. You address or fax may submit it as a	1	Etrieve - F	- FAMD at R amily Size F	orm		
Fax:	310.338.2793	financialaid lmu edu/unload			FAO Staff		-		