



A. Student Information

Last Name

First Name

Middle Initial

ODU Student ID Number or Last 4 of SSN

Phone Number (including area code)

Date of Birth

B. Family Information

1. List the people in your family in the space provided below. Include the following:
yourself, even if you don't live with your parents,
your parent(s) (include step-parent if applicable),
your parents' other children who live with your parents (or live apart because of college enrollment) **IF** your parents provide more than half of their support and will continue to provide more than half of their support between July 1, 2024 and June 30, 2025, and
other people **IF** they now live with your parents **AND** your parents provide more than half of their support and will continue to provide more than half of their support between July 1, 2024 and June 30, 2025.

If you need more space, please attach a separate page. 4.34 311.81 Tm0 g0 [attac]-3(h)6()-2(a)-4(s)3(ep)-7(ar)-5(ate)-5acI

