

Office of Financial Aid & Scholarships

2023-2024 PARENT HOUSEHOLD STATEMENT

Student's Name: LSU ID: 89				
List the people in your responsible parent	ts' household	d. Include the following	ing:	
 yourself 				
	ır responsible	e parent. If both pare	parent is widowed or single, divorced onts live together but are not married, in the and stepparent.	
	e than half of	f their support from J	s) if : July 1, 2023 through June 30, 2024 or a when applying for Federal Student A	
• unborn children that are due before Judue date. If documentation is not pro-			rsician on letterhead is required with the moved from the household.)	he unborn child's
			ide more than half of their support and e 30, 2024; and your parents claim the	
NOTE: If someone other than an immed IRS tax return. If your parent does not listed on this form.	ediate family file a federa	member is listed, y il income tax return,	ou should attach a copy of your pare no one other than immediate family	nt's 2021 or 2022 members may be
Write the names and ages of all househol your parent(s), who will be attending coll degree, diploma, or certificate program.	lege at least l	half-time between Ju	ly 1, 2023 and June 30, 2024 and will	
Full name of household member	Age	Relationship to student	Name of college attending during 2023-2024 academic year	Is the individual enroll college during the 2023 academic year enrolled a half time? Yes or No
By signing this statement, we certify tha misleading information on this worksh	t all informa eet, you ma y	ation on this form is y be fined, be sente	complete and correct. *If you purponced to jail, or both.	sely give false or
Note: Electronic signatures will not be a	accepted. You	u must print to sign.		
Student's Signature			Date	
Parent's Signature			Date	