Please l for whom the parent provides over 50% financial support for. Include all that apply:

- The student.
- The parents (including a stepparent) even if the student does not live with the parents. Exclude a parent who has died or is not living in the household because of separation or divorce. Include a parent who is on active duy in the U.S. Armed Forces apart from the family.
-
    - o
    - o
    - o
      year.
- Other persons if the following are true:
    - o
    - o
    - o They will continue to receive more than half of their support from the student's parents during the award year.
-
  size include only those individuals the parent could claim as a dependent on a U.S. tax return if the parent were to file a U.S. tax return at the time of completing the 2024-2025 FAFSA. As a result, the parent should not include any unborn children in the family size.

Full Name (*First, Last, Suffix if applicable*)	**Age**	**Relationship to Student**	**Name of college the person is/will be enrolled in, if applicable**	**Is/will be enrolled in at Least Half-Time? (*YES or NO*)**
		STUDENT	BELLARMINE UNIVERSITY	