



Office of Financial Aid
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INCLUSION of PARENT ATTENDING COLLEGE DURING THE 2011-2012 ACADEMIC YEAR

Student's Name: _____ UHV Student ID#: _____

The student named above has indicated that one of his or her parents will be attending a college or university during the 2011-2012 academic year. The Free Application for Federal Student Aid (FAFSA) does not allow the student to count a parent as attending college or university in the initial processing of the FAFSA. In order to have this situation considered for review, the parent must meet the following criteria: 1) be attending at a college or university that is eligible to provide federal financial assistance to its student body; 2) be enrolled at least half-time at the official census date for the college or university; and 3) be seeking a degree or certificate.

Please submit the following:

- Detailed narrative of the financial hardship placed on your family's financial resources due to your parent being enrolled in college.
Signed and dated copy of parent/step-parent's 2010 tax return with all W-2's, 1099's, etc.
Signed and dated copy of student's 2010 tax return with all W-2's, 1099's, etc.
Signed and dated copy of the 2011-12 Verification Worksheet form. All forms at: www.uhv.edu/ofa/forms.aspx

Section A (to be completed by parent):

Name of Parent: _____ Parent Student ID#: _____

Institution Parent is attending: _____

Semesters Attended:

___ Fall 2011 ___ Spring 2012 ___ Summer 2012

Student's Signature _____ Date _____ Parent's Signature _____ Date _____

Section B (to be completed by College or University the family member is attending):

What is your institution's official census date? _____

Please Note: This form cannot be completed until this date has passed.

Is the person listed in Section A currently enrolled at least half-time at your institution? (Please check the following semesters that apply).

Term(s) enrolled: Fall 2011 ___ Spring 2012 ___ Summer 2012 ___

Is this person seeking a Degree/Certificate? Yes [] No []

I certify that the above information is correct.

Signature of Registrar _____ Name of Institution _____

Title _____ Date _____

PLEASE RETURN THIS FORM AND SUPPORTING DOCUMENTS TO THE ADDRESS SHOWN ABOVE

PRIVACY NOTICE

State law requires that you be informed of the following: (1) with few exceptions, you are entitled on request to be informed about the information the University collects about you by use of this form; (2) under sections 552.021 and 552.023 of the Government Code, you are entitled to receive and review the information; and (3) under section 559.004 of the Government Code, you are entitled to have the University correct information about you that is incorrect.