



## Office of Financial Aid

### 2014-2015 Sibling Enrollment Verification Form

**Deadline: Friday, September 13, 2014**

Your 2013-2014 FAFSA application indicates your sibling(s) is attending college. **Please have your sibling complete STEP TWO and forward this form to their school's Financial Aid Office to complete STEP THREE.** If your sibling's enrollment has changed, your financial aid package may be adjusted to reflect the change in the number in college. If your financial aid package changes, a revised award letter will be sent.

#### STEP ONE

Salve Regina Student's Name (Please Print) \_\_\_\_\_

Student ID# \_\_\_\_\_

#### STEP TWO

*To be completed by Your Sibling in College*

I grant the Financial Aid Office at \_\_\_\_\_  
to release information below to the Salve Regina University Office of Financial Aid.

Sibling's Name (Please Print) \_\_\_\_\_

Sibling's ID# \_\_\_\_\_

Sibling's Signature \_\_\_\_\_

Date \_\_\_\_\_

#### STEP THREE

*To be completed by Your Sibling's Financial Aid Office*

Enrollment and Dependency Status for student named in STEP TWO: (Check one box from each column)

Full Time <input type="checkbox"/>	Dependent <input type="checkbox"/>	On Campus <input type="checkbox"/>	Undergraduate <input type="checkbox"/>	Degree <input type="checkbox"/>
Half Time <input type="checkbox"/>	Independent <input type="checkbox"/>	Off Campus <input type="checkbox"/>	Graduate <input type="checkbox"/>	Certificate <input type="checkbox"/>
Less Than Half Time <input type="checkbox"/>				Non-Degree Program <input type="checkbox"/>
Not Enrolled <input type="checkbox"/>				

Expected Date of Graduation \_\_\_\_\_

Cost of Attendance \_\_\_\_\_

Signature of School Official \_\_\_\_\_

Date \_\_\_\_\_

Name and Title (Please Print) \_\_\_\_\_

Telephone Number \_\_\_\_\_

**Fax or return to: Salve Regina University Office of Financial Aid, 100 Ochre Point Ave, Newport, RI 02840**

**Fax: 401-341-2928**

**Email: [financial\\_aid@salve.edu](mailto:financial_aid@salve.edu)**

**Phone: 401-341-2901**

Rev. 11/12



## Office of Financial Aid

Dear Student,

Several factors, other than income, affect a family's ability to pay for their children's education. These variables include elements such as the size of the family, the age of the parents, unusual medical expenses and the number of dependents attending college or university at the same time. At Salve Regina University, our goal is to equitably distribute limited institutional resources; therefore, it is necessary to verify all aspects of your financial aid application including the college enrollment of your siblings.

You indicated on your FAFSA and/or CSS PROFILE that at least one sibling (brother or sister) is enrolled in college as an undergraduate student this year. Because your financial aid package was based on this information, we require verification of that information in order for you to maintain the aid package you have at present.

- If your sibling did not enroll at a college or university, please contact our office immediately.
- If your sibling is enrolled at a college or university, please forward the enclosed Sibling Enrollment Verification Form to him/her for completion. Your sibling will need to request that a financial aid administrator at his/her institution complete the appropriate section.

Please note that if new information is provided on the Sibling Enrollment Verification Form, we may adjust your financial aid. Information that could change your financial aid includes non-enrollment of sibling, sibling enrolled less than full-time or, a sibling with the following status: in graduate school, receiving financial aid as an independent student, receiving full tuition benefits or enrolled in a service academy.

We must receive the completed Sibling Enrollment Verification Form, on the reverse side of this letter, no later than **September 13**. We have provided a fax number so that the Financial Aid Administrator, at your sibling's school, can fax the completed form to our office. **If you fail to provide this documentation by the indicated deadline, we will assume that your sibling has not enrolled and we will adjust your financial aid package accordingly.**

Should you have any questions about this process, please contact us at (401) 341-2901 or [financial\\_aid@salve.edu](mailto:financial_aid@salve.edu).

Sincerely,

**Aida Mirante**

Aida Mirante  
Director of Financial Aid