C. To Be Completed by Sibling's Financial Aid Administrator

Dependency Status T Dependent Degr

Full-time
T Half-time
T Less than Half-time
T Not Enrolled

Residency Status T Resident
T Commuter
T 2 • & D P S X V

2024–2025 Enrollment Dates: _____ _____
(begin date) (end date)

Student's total cost of attendance for 2024–2025: _____ T uition and Fees