

## EDGEWOOD COLLEGE FINANCIAL AID (P) 608-663-4300 | (F) 608-663-3495 | ecentral@edgewood.edu | 1000 Edgewood College Dr., Madison, WI 53711

st Name:		First Name:		M.I.: Fd	gewood ID#:
					orm and submit any requested document
		•		•	cil verification has been completed.
arent(s) Current Marital S	itatus		Month/Year		
<b>1</b> Married					
☐ Remarried					
☐ Separated					
☐ Divorced					
Widowed				_	
Never Married				4	
Unmarried & Both Parer	nts Living	Together			
<ul> <li>Your parent(s) (inclusion</li> <li>Your siblings, step s support from 7/1/26</li> </ul>	uding step iblings, or	other people wh	o live with your p	rents and your p	parents will provide more than half of the
<ul> <li>Your siblings, step s support from 7/1/2</li> </ul>	uding step iblings, or	parent). other people wh	College Name	or any household m	ember attending at least half-time between July 1,
Your siblings, step s support from 7/1/2  Full Name	uding step iblings, or 4 through	parent). other people wh 6/30/25.	College Name 2024 and June 30,	or any household m 025, and will be enr	
Your siblings, step s support from 7/1/2  Full Name	uding step iblings, or 4 through	parent). other people who 6/30/25.  Relationship	College Name	or any household m 025, and will be enr	ember attending at least half-time between July 1,
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Date

must receive verification materials no later than one

week prior to the last date of attendance.

Parent's Signature