



Initials: _____

UNIVERSITY OF SOUTH ALABAMA

2019 - 2020

Verification of Enrollment

PART I: To be completed by the STUDENT:

This form is required for each family member attending college who was listed on the FAFSA as being in the household and in college. Family members in college must be enrolled at least half-time in a degree or certificate program at a postsecondary institution eligible to receive federal funds. Please have the Financial Aid Office complete a separate form for each student.

USA Student: _____ JAG#: _____

Family Member _____

Relationship to USA Student: _____

PART II: To be completed by the FAMILY MEMBER'S Financial Aid Office at the school of enrollment:

Section A

The **family member** named in the student section is (CIRCLE):

The student is an:	<i>Undergraduate</i>	<i>Graduate</i>	<i>Receiving aid</i>	<i>Not an aid applicant</i>
in a	<i>Degree Program</i>	<i>Certificate Program</i>	<i>Non-degree Program</i>	
enrolled	<i>Full-time</i>	<i>3/4 time</i>	<i>1/2 time</i>	<i>Less than 1/2 time</i>
for the	<i>Fall</i>	<i>Spring</i>	<i>Summer</i>	semester of
				the 2019-2020 academic year.

First day of class: _____ Last day of class: _____ Estimated Graduation Date: _____

Section B

Authorized Signature: _____ Date: _____

Typed Name: _____ Title: _____

Name of Institution: _____