



**Kean University**  
**Office of Financial Aid**  
**1000 Morris Avenue**  
**Union, NJ 07083**

**Phone 908-737-3190**

**Fax 908-737-3200**

**2019-2020 Verification of Sibling/Spouse/Child In College Form**

Kean Student Name: \_\_\_\_\_

Kean ID #: \_\_\_\_\_

You indicated on your FAFSA and/or Verification Worksheet that another member(s) of your or your parent's household (excluding your parents) will be enrolled in college at least halftime for the 2019–2020 Academic Year. The family member attending college and the school that s/he will attend this year must complete the respective sections below. The school must then forward this form to the Kean University Office of Financial Aid. Your file will remain incomplete until we receive this form for each family member attending college.

**Family Member in College**

Family Member's Name: \_\_\_\_\_

Relationship to Kean Student: \_\_\_\_\_

Name of Institution Attending: \_\_\_\_\_ Student ID #: \_\_\_\_\_

Term(s) attending: \_\_\_\_\_ Fall 2019 \_\_\_\_\_ Spring 2020 \_\_\_\_\_ Summer 2020

I authorize the above-referenced institution to disclose my current or expected enrollment status for the 2019-2020 school year to Kean University.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

.....  
**School Certification** (to be completed by Financial Aid, Registrar, or other School Official)

This is to certify that the above-listed student is or will be enrolled at our institution for the term(s) and status(es) indicated below:

\_\_\_ Fall 2019:    \_\_\_ Fulltime    \_\_\_ Three-Quarter Time    \_\_\_ Halftime    \_\_\_ Less than H/T  
\_\_\_ Spring 2020:    \_\_\_ Fulltime    \_\_\_ Three-Quarter Time    \_\_\_ Halftime    \_\_\_ Less than H/T  
\_\_\_ Summer 2020 (Trailer Period for 2019-2020):  
                         \_\_\_ Fulltime    \_\_\_ Three-Quarter Time    \_\_\_ Halftime    \_\_\_ Less than H/T

School Official's Name (print): \_\_\_\_\_ Title: \_\_\_\_\_

School Official's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Institution: \_\_\_\_\_ OPE ID: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_