

Zilber Hall, Suite 121, or mail to Marquette Central, Office of Student Financial Aid, P.O. Box 1881, Milwaukee, WI 53201-1881.

NOTE: Photographs of documents are not acceptable, see [Scanning Documents with your Phone](#) for assistance.

A. Student Information

Last Name	First Name	M.I.	Marquette Identifier (MUID)
Address (include apt. no.)		Date of Birth	
City	State	Zip Code	Phone Number (include area code)

B. Family Information *If more space is required, attach a separate page

Full Name		
<p>Write the names of the people in your parent(s)' household in the chart below:</p> <ol style="list-style-type: none"> 1. Include yourself on the first line. 2. Include your parent(s): <ul style="list-style-type: none"> • <u>If your parents are divorced</u>, list the parent who provided the majority of your financial support during the last 12 months. If your parents provide equal support, report the parent with the higher income and assets. • <u>If your parent is remarried</u>, include step-parent. • <u>If your parents are unmarried but live together</u>, list Parent #1 and Parent #2. 3. Include your parent(s)' other children, if your parents provide more than half of their support between July 1, 2025 and June 30, 2026 or if the children would be required to provide parental information if they were completing a 2025-26 FAFSA. <p>Include other dependents, if they now live with your parent(s) and your parent(s) will continue to provide more than half of their support through June 30, 2026.</p>		
Age	Relationship to Student	
Write the age of each family member in the chart below.	Write the relationship of each family member to the student in the chart.	
Full Name	Age	Relationship to Student
(EXAMPLE) Missy Jones	18	Sister
		Self

