

Sibling Enrollment Verification
2018-2019

SIBVER

On your financial aid application, you indicated that you have at least one sibling attending an undergraduate college or university at least half-time during the 2018-2019 academic year. Your financial aid award is tentative, pending receipt of this document, and may be adjusted based on the verification below.

If you have more than one sibling enrolled, **you must have each sibling complete a copy of this form.** Please complete Section 1 of this form, have your sibling complete section 2, and have her/his Financial Aid Office and/or Registrar complete sections 3 & 4 and return the form to Student Financial Services.

This form must be received by October 12, 2018

Section 1: Wellesley Student Information

Student Name: _____ Wellesley ID Number: _____

Section 2: Sibling Information

Sibling Name: _____ Sibling School ID Number: _____

In order to verify the information provided on my sibling's Wellesley College financial aid application, I authorize _____ to release the information requested below to Wellesley College.
(name of sibling's college/university)

Sibling Signature: _____ Date: _____

Section 3: To be completed by the Financial Aid Office/Registrar at sibling's college/university

Enrollment Status: Full Time Half-Time Less than half-time Not Enrolled

Program: Bachelors Degree Associates Degree Certificate Program Other: _____

Expected Date of Graduation (Month/Year): _____

Total Cost of Attendance for 2018-19: _____

Did the student apply for financial aid? No Yes – if so, complete the following:

Dependency Status: Dependent Independent

Total Financial Assistance: _____
(excluding parent and private loans)

Section 4: School Certification

By signing this worksheet, I certify that all information reported is accurate to the best of my knowledge.

Signature: _____ Name and Title: _____

Email address: _____ Phone Number: _____ Date: _____