2021-2022 Verification of Sibling Enrollment

Washington University Student Name: __________________________  ID Number: __________

Your financial assistance application stated you have a sibling(s) attending college at least half-time in a degree or certificate seeking program during the 2021-2022 academic year. Please have your sibling(s) complete section A of this form and then have section B completed by his/her financial aid office. Failure to return this completed form to the Washington University Student Financial Services office by October 1, 2021 could result in an adjustment to your 2021-2022 Washington University Scholarship award. If your sibling also attends Washington University in St. Louis, please complete section A and return form to Student Financial Services.

Note: A separate form must be completed for each sibling enrolled in college.

A. To Be Completed By Sibling:

Sibling Name: __________________________  Sibling ID Number: __________

Sibling College or University: __________________________

In order to verify information on my sibling’s Washington University financial assistance application, I authorize the institution in which I am enrolled to release the information requested to Washington University in St. Louis.

Sibling Signature: __________________________  Date: __________

B. To Be Completed By The Financial Aid Officer or Registrar at Sibling’s College or University:

2021-2022 Enrollment Information:

Status: ( ) Full-Time  ( ) Half-Time  ( ) Less Than Half Time  ( ) Not Enrolled
Level: ( ) Undergraduate  ( ) Graduate/Professional

Is the student enrolled in a degree or certificate seeking program? ( ) Yes  ( ) No
Is your college or university eligible to participate in the U.S. Federal Student Aid programs? ( ) Yes  ( ) No

Expected date of graduation (month/year): ______/_______

I certify this information is accurate to the best of my knowledge

Printed Name: __________________________  Title: __________________________

Signature: __________________________  Date: __________________________

Email Address: __________________________  Phone: __________________________

Please submit this form and supporting documents by uploading to your Net Partner Portal, available here: https://financialaid.wustl.edu/financial-aid-portal/

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