

Office of Enrollment Management

2022-2023 STUDENT HOUSEHOLD STATEMENT

Student's Name:	Student's Name:			LSU ID: 89	
List the people in your (Please use only black or blue					
 yourself and your specified 	pouse, if appli	cable			
• your children, if yo	u will provide	more than half of the	eir support from July 1, 2022 through	June 30, 2023	
			letter from a physician on letterhead ided, the unborn child will be removed		
	nalf of their su		de more than half of their support and 022 through June 30, 2023; and you o		
NOTE: If someone spouse's 2020 or 202 family members may	1 IRS tax retu	ırn. If you do not file	nember is listed, you should attach e a federal income tax return, no one	a copy of your/your other than immediate	
member, excluding you	ir parent(s), w	ho will be attending	o write in the name of the college for college at least half-time between Jul tificate program. If you need more s	y 1, 2022 and June	
Full name of household member	Age	Relationship to student	Name of college attending during 2022-2023 academic year	Is the individual enrolled in college during the 2022-202 6academic year enrolled at least half-time? Yes or No	
By signing this statemerical give false or misleading	ent, we certify	y that all information n on this worksheet	on this form is complete and corre , you may be fined, be sentenced to	ct. *If you purposely jail, or both.	
Note: Electronic signa	tures will not	be accepted. You mi	ust print to sign.		
Student's Signature			Date		
Spouse's Signature	Spouse's Signature		Date		