2022-2023 PARENT/SIBLING VERIFICATION OF ENROLLMENT FORM

Name: Last	First	UID#	
Check this box if you p	lan to enroll for Summer 2022	2 (a separate Summer Aid Ap	plication is Required)
Complete Section A & B of this attending. The Bursar/Registrar			
SECTION A: UCLA STUDEN	T INFORMATION		
Mailing Address	Street		Apartment #
City	State		Zip Code
SECTION B: PARENT/SIBL	ING INFORMATION		
Name of Parent/Sibling	Social Security N	umber Na	me of College/University
SECTION C: ENROLLMENT	egistrar:		
 Is the student listed in SEC Program? □ Yes □ No Please confirm the enrollmet 	0	ee or academically recogr	□ Less than half-time
3. Expected month/year of grad of program:	luation or completion		of verifying ution)
Name	Title		Phone Number
Signature of Authorized School Offi	cial		Date
* If the school attended is not a Title IV eligible institution, the individual will not be considered in number in college.			
HOW TO SUBMIT			

ONLINE: Log on to MyUCLA> click Finances and Jobs tab> under Financial Aid and Scholarships click> View All Documents. Attach form as necessary FAX: Fax: 310-267-4143 Attn: UCLA Financial Aid and Scholarships