



**CERTIFICATION OF ENROLLMENT OF OTHER SIBLINGS  
ATTENDING COLLEGE DURING THE ACADEMIC YEAR 2017-18**

You indicated on your 2017-18 financial aid application that more than one child in your family will be attending college. The number of children in college is an important factor in the calculation of financial need, so we require verification of enrollment of siblings. We will use the National Student Clearinghouse database to verify sibling enrollment. Approximately 80% of colleges and universities participate in the National Student Clearinghouse.

If your sibling's enrollment plans change, it is important that you let the Financial Aid Office know promptly. This may change your financial aid award.

**Section 1: St. John's College Student's Information**

Student's Name: \_\_\_\_\_

Number of siblings (other than your self) enrolled in college in 2017-18: \_\_\_\_

**Section 2: Sibling Information**

Complete all of the spaces for each sibling that will be attending college or university in a degree, diploma or certificate program in 2017-18.

Full Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB \_\_\_\_\_

College or University attending in 2017-2018: \_\_\_\_\_

Full Time \_\_\_\_ Half Time \_\_\_\_ Less Than Half Time \_\_\_\_ Undergraduate \_\_\_\_ Graduate \_\_\_\_

Full Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB \_\_\_\_\_

College or University attending in 2017-2018: \_\_\_\_\_

Full Time \_\_\_\_ Half Time \_\_\_\_ Less Than Half Time \_\_\_\_ Undergraduate \_\_\_\_ Graduate \_\_\_\_

Full Name: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB \_\_\_\_\_

College or University attending in 2017-2018: \_\_\_\_\_

Full Time \_\_\_\_ Half Time \_\_\_\_ Less Than Half Time \_\_\_\_ Undergraduate \_\_\_\_ Graduate \_\_\_\_

**Please return to:**

St. John's College  
Financial Aid Office  
60 College Ave  
Annapolis, MD 21401  
annapolis.financialaid@sjc.edu  
Fax: 410-626-2885

St. John's College  
Financial Aid Office  
1160 Camino Cruz Blanca  
Santa Fe, NM 87505-4599  
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Fax: 505-984-6164