EMPORIA STATE U N I V E R S I T Y FINANCIAL AID, SCHOLARSHIPS, & VETERANS SERVICES

Independent C 2019-2020 Proof of Dependency Worksheet

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Institutional Proof of Dependency Form

In general, students under the age of 24 are dependent students, meaning they must provide parent income information on the FAFSA. You are currently independent because you said "YES" to the FAFSA question about supporting children or dependents other than children or spouse. To verify that your dependency status for financial aid is correct, please provide the information requested below. *Failure to respond promptly will delay processing of your financial aid.* (CFR Title 34, Part 668). Note: You may be asked to provide additional documentation during this dependency review.

A. Student Information

Last Name		First Name	MIStudent ID #		
Address (local if available))		Date of Birth		
City	State	ZIP code	Phone Number		
 I <u>do not</u> have a child for whom I provide for half of their support. Skip to C. I <u>do</u> have a child for whom I provide for half of their support. Proceed to B. I <u>do</u> have a dependent other than a child or spouse. Proceed to B. 					

B. Family Information

List below information regarding children/dependent(s) for which you will provide more than half the support from July 1, 2019 through June 30, 2020. Support can be in the form of housing, food, medical/dental care, childcare, your income, or from state/federal programs, such as WIC, food stamps, or from child support you pay or receive.

Full Name of Child/Dependent	Age	Relationship to you	Source of Support YOU Receive or Pay and Approximately Value (list separately)
Corky Hornet (Example)	2	Son	Include all sources with amounts for each: i.e. Income from Work, Child Support, WIC, Food Stamps, Financial Aid. (Example: Income \$400/month, WIC/\$200/month)

C. Sign This Form and Return Immediately to Financial Aid:

I certify that the information reported on this form is complete and correct. I understand that if I purposely give false or misleading information, I may be fined, sentenced to prison, or both.

Signature of Student_

Date_