

Verification of Dependent Support Worksheet 2023-2024

Student Name		Student ID#	
You indicated on your FAFSA that y than half of their financial support			•
Please answer the questions on the money, housing, utilities, insurance expenses.			
Note: If you do not provide more t the answer to the support question and then you will need to add pare FAFSA at studentaid.gov.	n on the FAFSA ((in the Dependency Status sect	ion) from "Yes" to "No",
Please list the names and ages of y	our dependent(s) and their relationship to you	ı:
Name	Age	Relationship	
Do you live with a relative or so	omeone else wh	no provides you with free or re	duced housing?
		u pay for housing each month: \$_	-
		elationship to you:	
How many people, including	; yourself and you	r dependents, live at this address	?
What is the total monthly re	nt/mortgage amo	ount?	
Of the total monthly rent/mo	ortgage amount, h	how much do <u>you</u> pay?	
2) Please list your expected incom	ne sources <u>betw</u>	veen July 1, 2023 – June 30, 20	<u>24</u> .
Monthly wages, after taxes: \$		Monthly social security:	\$
Monthly welfare/TANF benefits: \$	\$	Monthly SNAP/WIC benefi	ts: \$
Monthly child support received:	\$	Other	\$
 Please provide a detailed explana dependent(s). You may attach and 			6 of the support of your
By signing this worksheet, I certify t			
tudout Signatura		5	ata.