

C. Additional Information

1. Are you currently residing with anyone other than your children? Yes No

If "Yes", what is their name and relationship to you?

Name _____ Relationship _____

How much is this person contributing towards the monthly household expenses? \$ _____ month

2. Who **claimed** your child(ren) as a dependent on their **2022 federal income tax return**?

Name _____ Relationship to your child(ren) _____

Submit a copy of the child's (children's) birth certificate(s) with this form. A copy of the birth certificate is not needed if you submitted a copy previously.

Incomplete forms will be returned

By signing this statement, I, the student, certify that the information has been read and is accurate and true. If I, the student, purposely give false or misleading information, I may be subject to prosecution per Federal Regulations.

Student Signature: _____ Date: _____

**Return to: 1 Academic Drive, Corning, NY 14830 • Attn: Financial Aid
Phone (607) 962-9875 • Fax (607) 962-9019**