



2020-2021 Verification of Dependent Support

Student Last Name

First Name

CID Number or SSN

The Financial Aid Office has received your Free Application for Federal Student Aid (FAFSA) for the 2020-2021 academic year and you answered **YES** to having a child/children for whom you provide more than 50% of their support. Students who can demonstrate that they will provide more than half of their child(ren)'s financial support from **July 1, 2020 through June 30, 2021** may be considered independent for federal financial aid purposes.

If you do not provide over half of the financial support for your child(ren), **you need to correct the answer to question 51 on your FAFSA at studentaid.ed.gov/sa/fafsa** to "no" and provide parent information and signature.

You must complete all sections below:

A. List all dependent children for whom you provide more than half of their support.

Name of Child	Date of Birth	Child lives with me
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No

B. Document how you support yourself and your children. Indicate your current **monthly** income and attach the *required documentation* for each source of income below. Indicate "0" for income not received.

Income Source	Monthly Amount	Required Documentation
Wages	\$	Recent pay stub(s)
Child Support	\$	Current documentation of child support received
Public assistance	\$	Public assistance budget
Social Security	\$	Social Security statement
Assistance from your parent(s)	\$	Written statement from parent(s) signed and dated
Other	\$	Document verifying amount of income received

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 2019 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**