

Financial Aid

Phone: 508-929-8056 Fax: 508-929-8194

ID#:				

NAME: _____

				FA	C21PDF
		2021/20		(C) FORM	
Stud	ent's Address	PROOF OF DEPEN			
Pare	nt Name	SS# _			
Pare	nt Address				
depe inten	form is used to gather information and enter or in other situations when the ded results. You may be required on in your household size. Please	n necessary. Please note to d to have your parents con	hat com	pletion of this form d he FAFSA or may not	oes not guarantee your t be eligible to include the
1.	Please list the names and ages LEGAL DOCUMENTATION GUARDIANSHIP, ETC)	s of your dependents and to ON OF THEIR RELATION	their rela ONSH	ationship to you. YO IP TO YOU (BIRTH	U MUST PROVIDE I CERTIFICATE, LEGAL
	endents are those people for whom 2022. Include other people only in				July 1, 2021 through June
	a. they now live with you, anb. they now get more than hac. they will continue to get th	lf of their support from yo		01/21 and 06/30/22	
• •	port includes money, housing, foo	d, clothes, car, medical ar	nd denta	l care, payment of co	llege costs, and similar
	Name	Last 4 digits of SS#	Age	Relationship	
2.	Who is the legal custodial par	ent of the dependent?			
3.	Do you PAY child support for	r support of this child?			
4.	Do you RECEIVE child supp	ort for support of this chil	ld?		
5.	Where do you live?				
	[] With parent(s)[] In your own apartment YO[] Other - please explain	OU MUST PROVIDE C	ОРҮ О	F YOUR LEASE	
6.	Does the dependent live with	you?			
	[] Yes [] No - if no, with whom o	loes the dependent live	?		



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7.	Were you claimed by your parent(s) on their 2019 tax return? YOU MUST PROVIDE PAGE 1 OF YOUR PARENT'S 2019 IRS TAX RETURN [] Yes [] No – if no, who claimed you?
8.	Was the dependent claimed by your parent(s) on their 2019 tax return? YOU MUST PROVIDE PAGE 1 OF YOUR PARENT'S 2019 IRS TAX RETURN [] Yes [] No – if no, who claimed your dependent?
9.	Who did/will claim you in 2020?
10.	Who did/will claim the dependent in 2020?
11.	Who did/will claim you in 2021?
12.	Who did/will claim the dependent in 2021?
13.	List all sources and amounts of current monthly income that you use to support you and your dependent:
	\$ Income earned from work \$ Child Support \$ TANF Benefits (Temporary Assistance for Needy Families) \$ Other – please explain
14.	Please list the estimated monthly expense for the support of your dependent(s)
	\$per month.
	Please list your child's monthly expenses:
Check	off that you have attached a copy of the following:
[] CC [] ST	GAL DOCUMENTATION OF YOUR DEPENDENT'S RELATIONSHIP TO YOU OPY OF LEASE <i>IF YOU LIVE IN YOUR OWN APARTMENT</i> UDENT'S 2019 IRS TAX RETURN ARENT'S 2019 IRS TAX RETURN
	by that the above information is complete and correct. Do not leave any blanks. If not complete this form will be ded to you.
SIGNA	ATURE (student) DATE: