



VERIFICATION OF INDEPENDENT STATUS FORM

It takes a minimum of 5 to 10 days for all Verification forms and documentations to be reviewed

You are required to complete this form because you answered **yes** to at least one the following questions on the 2023-2024 FAFSA:

- Do you have children who will receive more than half of their support from you between July 1, 2023 and June 30, 2024?
- Do you have dependents (other than your children or spouse) who will receive more that half of their support from you between July 1, 2023 and June 30, 2024?

You must complete this form and attach all required documents listed below before submitting. If you do not submit all documents together and complete or if the Financial Aid Office determines you are not providing more than half financial support, the corresponding question on your FAFSA will be corrected with a response on **“no”** and you will be required to update your FAFSA with parental information before your financial aid can be processed.

Write your name and ID# at the top of all supporting documentation.

Student Name: _____ ID#: _____

1: Do you have children who will receive more that half their support (including housing expenses) from you during the academic year beginning July 1 2023 through June 30, 2024? If yes, list below the person(s) for whom you indicated on the FAFSA you provide more than half financial support for by name and relationship. If more than 2 attach separate page with name and relationship. Must attach Birth Certificate(s).

_____ Yes _____ No

Name: _____ Relationship: _____ Age: _____

Name: _____ Relationship: _____ Age: _____

2: Do you have legal dependent (other than your spouse or children) who live with you and receive more than half of their support from you now and during the academic year beginning July 1, 2023 through June 30, 2024? If yes, list below name, relationship and age and you will need to provide supporting court documentation.

_____ Yes _____ No

Name: _____ Relationship: _____ Age: _____

Name: _____ Relationship: _____ Age: _____

3: Document how you provide more than 50 percent financial support.

Attach to this form a signed written statement detailing how you are providing more that 50 percent financial support for the person(s) listed in 1 or 2 and yourself. Include documentation of sources and amounts of all income such as employment (attach 2021 Tax Return, all Schedules and W-2's), public assistance (such as SNAP, TANF, HUD, etc.) financial support from a child's other parent (child support) or other persons, etc.

4: Do you live with your parent(s)

_____ Yes _____ No

If **no** must provide a written statement with documentation explaining your living situation with address of residency and attach a copy of a Utility Bill and copy of signed Lease Agreement where you and child live.

5: If you live with your parent(s), but are paying for you and your child's housing expenses (e.g. rent), please answer the following questions and provide supporting documentation.

Monthly housing expenses paid: \$ _____

To whom paid: _____

Other monthly expenses paid: \$ _____

To whom paid: _____

Once this form is reviewed, additional documentation may be required. Final determination of your dependency status will be made after review of all documentation submitted.

By signing this form, you certify that all information reported is complete and accurate.

Student Signature

ID#

Date

FA Use Only

D _____ I _____

Date: _____

Documentation provided: _____