



Office of Financial Aid, Kent Wyatt Hall 144, Cleveland, MS 38733
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2023-2024 Legal Dependent Form

Student's Name _____

Student ID# _____

You indicated that you have a child and/or legal dependent that you support. A legal dependent is one who received more than half of his/her support from the student at the time of application and will continue to receive that support for the entire 2023-2024 award year. You must attach supporting documents (examples include: copy of your most recent check stub, AFDC check, tax return, child support paid and/or received, WIC, Medicaid/Medicare). Complete this form to identify if you are eligible to be an independent student based on your legal dependents.

PLEASE ANSWER ALL QUESTIONS CAREFULLY. DO NOT LEAVE ANY BLANKS.

1. Names, ages, and relationship to the student of dependent(s).*

Name	Age	Relationship
_____	_____	_____
_____	_____	_____

*Must provide legal documentation (Birth Certificate, Legal Guardianship, etc.)

2. Where do(es) the above-named dependent(s) live?

With Student With student's parent(s) Other _____
Please explain

3. Was your dependent claimed by anyone other than you (the student) on the previous year tax return?

Yes No Whom/Relationship _____

4. I (the student) will provide \$ _____ per month for the support of my dependent(s) over and above the support received through any federal program listed below.

5. Sources of support (i.e. WIC, Medicaid/Medicare, SNAP, etc.): _____

6. Are you receiving child support for your child(ren)?

Yes No If yes, amount received in 2021 per year? _____ How much will you receive in 2023 per month? _____

7. Are any of your child's relatives providing financial support for you and/or your child?

Yes No If yes, amount received in 2021 per month? _____ Whom/relationship: _____

8. You (the student) will live:

Resident Hall With parent(s) Other _____
 Family Housing Rent your own apartment/house. If so, attach lease agreement.

9. Were you (the student) claimed by your parent(s) on their previous year tax return? Yes No

SIGNATURE REQUIRED

By signing this worksheet, I (we) certify that all the information reported on this worksheet is complete and correct. I understand that if I purposely give false or misleading information on this worksheet I may be fined, sent to prison, or both.

Student's Signature

Date

SFA USE ONLY

Approved Denied

Comments: _____

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