

Office of Financial Aid, Kent Wyatt Hall 144, Cleveland, MS 38733 P: (662)846-4670 F: (662)846-4683 E: financial Aid, Kent Wyatt Hall 144, Cleveland, MS 38733

2025-2026 Proof of Dependent Form - Parent/Independent

Student's Name		Student ID#	
ividual on your FAFSA, we must have do	cumentation of the dependent's i o identify if you are eligible to in	ember (i.e. grandparent, aunt, uncle, niece, nephew, etc.). To ir ncome. The income will not be used on the FAFSA to determine the dependent in your or your parent(s) household size. LEAVE ANY BLANKS.	
pendent's Name	Relatio	nship to the Student	
Reason that this person lives with you o	r your parent(s) and why you or	your parent(s) are supporting them?	
Does this person have any income?	YesNo		
Type of Income		Amount nor Month	
Type of Income Wages		Amount per Month \$	
Social Security		\$	
Retirement		\$	
SNAP Benefits		\$	
TANF Benefits		\$	
Disability		\$	
Other		\$	
Did this person file a 2023 Federal Inco	me Tax Return? Yes	_ No	
If yes attach a convict their 1013 IRS 1:	ax netarry		
(If Yes, attach a copy of their 2023 IRS To	3) provides specifically for this pe	erson (i.e. Rent: \$675 per month/5 household members = \$139	5.00):
Amount of support you or your parent(s	s) provides specifically for this pe	erson (i.e. Rent: \$675 per month/5 household members = \$135	5.00):
	s) provides specifically for this pe	erson (i.e. Rent: \$675 per month/5 household members = \$135 Amount per Month \$	5.00):
Amount of support you or your parent(s Type of Support	s) provides specifically for this pe	Amount per Month	5.00):
Amount of support you or your parent(s Type of Support Rent	s) provides specifically for this pe	Amount per Month \$	5.00):
Amount of support you or your parent(s Type of Support Rent Car Insurance	s) provides specifically for this pւ	Amount per Month \$ \$	5.00):
Amount of support you or your parent(s Type of Support Rent Car Insurance Car Payment	s) provides specifically for this pu	Amount per Month \$ \$ \$	5.00):
Amount of support you or your parent(s Type of Support Rent Car Insurance Car Payment Utilities	s) provides specifically for this p	Amount per Month \$ \$ \$ \$ \$	5.00):
Amount of support you or your parent(s Type of Support Rent Car Insurance Car Payment Utilities Clothing Food	s) provides specifically for this p	Amount per Month \$ \$ \$ \$ \$ \$ \$	5.00):
Amount of support you or your parent(s Type of Support Rent Car Insurance Car Payment Utilities Clothing Food GNATURE REQUIRED	at all the information reported	Amount per Month \$ \$ \$ \$ \$ \$ \$ \$ \$ on this worksheet is complete and correct. I understand the second correct.	
Amount of support you or your parent(s Type of Support Rent Car Insurance Car Payment Utilities Clothing Food GNATURE REQUIRED signing this worksheet, I (we) certify that	at all the information reported	Amount per Month \$ \$ \$ \$ \$ \$ \$ \$ \$ on this worksheet is complete and correct. I understand the second correct.	
Amount of support you or your parent(s Type of Support Rent Car Insurance Car Payment Utilities Clothing Food GNATURE REQUIRED signing this worksheet, I (we) certify the efalse or misleading information on this	at all the information reported s worksheet I may be fined, ser Date	Amount per Month \$ \$ \$ \$ \$ \$ \$ \$ \$ on this worksheet is complete and correct. I understand that to prison, or both.	hat if I purpos

Equal Access Statement

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