Dependency Questionnaire

2014-2015

Student Name

Student PID (Pxxxxxxxxx)

Student Signature

Date

On your 2014-2015 Free Application for Federal Student Aid (FAFSA), you indicated you have a legal dependent(s) (other than a spouse) who receives more than half of his or her support from you and who will continue to receive this support through June 30, 2015. Because of this, your application was processed as an “independent” student.

Additional information is needed to document your dependency status. Please answer the following questions regarding your living situation and financial support. Documentation may be requested of the information you provide.

Who financially supports you (the student)? __________________________________________

Who supports your legal dependent(s)? ______________________________________________

Where do you live, with whom, and for how long? ______________________________________

If someone else assists you in supporting your dependent(s) or someone else is living in your household, please state what percentage of support you and the other party (if applicable) provide to your dependent(s). Percentages must total 100% and must not be 50/50.

You: _________ Other Party (i.e. parent/significant other): __________

You must also complete the enclosed Family/College Form and return it to our office. If someone else is supporting you and/or your legal dependent(s), parental information will be requested and used to determine your financial aid eligibility.