



Student name: _____ SCC ID #: _____

You have indicated on the FAFSA that you have a legal dependent other than a spouse or child for whom more than 50% support is provided. To include someone as a dependent, current support plus future support must be more than 50% from July 1, 2019 through June 30, 2020. Please provide all documentation showing at least 50% support for the dependent(s) listed below. You must provide sufficient documentation to prove support for any legal dependents.

Failure to submit all documentation will result in a correction to the student's FAFSA to remove legal dependent(s) information. This may also result in a change of your dependency status (if you are under the age of 24).

WARNING: If you purposely give false or misleading information on this worksheet, you will be reported to the Department of Education. You may be fined, sentenced to jail, or both.

Instructions: List all dependent(s) other than a spouse or child below. Support for your dependent(s) includes housing, food, clothing, medical and dental care, childcare, money, gifts, and anything else you may provide. Resources that enable you to provide the support can include earnings you receive from work or in-kind support (housing/food in exchange for work), and assistance you receive from other agencies (Medi-Cal, TANF, SNAP, etc.). Attach additional documentation as needed.

Table with 5 columns: Name of dependent, Age, Relationship to student, Date he/she began living in household, Other sources of income for dependent. Example row: Sara Jones (example), 12, Niece, 1/1/2010, SSI, WIC, SNAP, Medi-Cal, etc.

If more space is needed, please attach a separate page with the student's name and SCC ID number at the top.

I provide more than 50% support for the person(s) listed above, and have attached ALL of the following:

- 1. Written statement detailing why the person(s) listed above are dependent on you. Please include:
- Who claims the child/dependent on federal taxes?
- Who pays (or will pay) for childcare, if applicable?
- Who pays (or will pay) for food and medical needs?
- If the dependent is over 24 years old, he or she MUST provide a written and signed statement regarding your contribution of more than 50% of his or her support.
2. Documentation of dependent(s)' income and/or benefits from all sources
3. Documentation of benefit(s) you are providing

I am unable to attach any documentation and have provided a written statement explaining why

By signing this form, I certify that all information is complete and correct to the best of my knowledge.

Student Signature

Date