



2027/2028 Support of Child or Other Dependent Verification Form

Student Name: _____

Student ID: _____

We recently received the results from your 2027/2028 Free Application for Federal Student Aid (FAFSA) form. On your FAFSA, you indicated that you have a child or other dependent that you support more than 50%. We need to verify this information is accurate.

Please answer the following questions regarding the dependent(s) that you will support during the 2027/2028 academic year (from July 1st, 2027 – June 30th, 2028).

Section 1:	
Will you receive child support during the school year?	☐ Yes ☐ No
List the amount you expect to receive. If you do not expect to receive child support, please list '0'.	

Section 2:	
Where or with who will you and your dependent(s) live during the school year?	

Section 3:	
Whose insurance is/are the dependent(s) covered under?	

Section 4:	
Explain how you will support your dependent(s) more than 50% during this school year. Account for items such as food, clothing, shelter, medical bills, childcare, diapers, and other essentials.	

By signing this form, I certify that all the information reported on this form is complete and correct.

Student Signature: _____ Date: _____

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.