

OFFICE OF FINANCIAL AID

120 East 149th Street, Savoy Building RM B-115 Bronx, NY 10451 Tel: (718) 518-6555, Fax: (718) 518-4430

2017-2018 CLARIFICATION OF SUPPORT FORM (DEPENDENT STUDENT)

Last Name:	First Name:
Last Four Digits of SSN:	EMPL ID:
The household size reported on your Free Ap on your 2015 federal income tax return.	oplication for Federal Student Aid (FAFSA) differs from the exemption(s) reported
Household size reported on FAFSA:	
Total exemption(s) on your and/or your pare	ent(s) 2015 federal income tax return:
PLEASE COMPLETE THE QUESTIONS BELOW	TO HELP RESOLVE THIS DISCREPANCY:
List the individual(s) in your and your parame Name	rent(s) household who were not claimed as an exemption on the tax return: Relationship to your parent(s)
•	
from July 1, 2017 to June 30, 2018. Depende live with them for the indicated academic y 2. Will your parent(s) provide more than 50 \(\subseteq \text{No. } \frac{\text{STOP}!}{\text{The individual(s) does note}} \)	In the head of the household will provide more than 50% of financial support ents other than your parent's biological children and your parent's spouse must ear. One support to the individual(s) listed above for the indicated period? It qualify as household member on the FAFSA. Do not answer the remaining on section located on the back of this form)
☐ Yes. Explain why the individual(s) list	ed above were not claimed as dependent(s) on the 2015 tax return and how
your parent(s) will be providing this	individual(s) more than 50% of support.
3. Did anyone claim the individual(s) listed□ No	above on their 2015 federal income tax return?
☐ Yes - Name:	Relationship:
- Name:	Relationship:

4.	Did the individual(s) listed previously file his/her own 2015 federal income tax return(s)? ☐ Yes ☐ No
5.	Was child support (Court Ordered) or any financial assistance received on behalf of the individual(s) listed in question #1? Yes - How much was the total amount received in 2015? \$ No
6.	Will the individual(s) listed in question #1 continue to live in your parent's household from July 1, 2017-June 30, 2018? Yes No - Please explain below
7.	Will you be claiming the individual(s) listed previously on your 2016 tax return?
	☐ Yes ☐ No - Please explain below
	STUDENT CERTIFICATION:
	I declare that all information submitted on this form is true and complete.
	Student's Signature: Date:
	Parent's Signature: Date:
	OFFICE USE ONLY
	Action Taken
	Request Additional Documentation: (Y/N)
	FA STAFF: Date: