2018-2019 CLARIFICATION OF SUPPORT FORM  
(DEPENDENT STUDENT)

Last Name: ___________________________________  
First Name: ________________________________

Last Four Digits of SSN: ______________________  
EMPL ID: ________________________________

The household size reported on your Free Application for Federal Student Aid (FAFSA) differs from the exemption(s) reported on your 2016 federal income tax return.

Household size reported on FAFSA: ________

Total exemption(s) on your and/or your parent(s) 2016 federal income tax return: ________

PLEASE COMPLETE THE QUESTIONS BELOW TO HELP RESOLVE THIS DISCREPANCY

1. List the individual(s) in your and your parent(s) household who were not claimed as an exemption on the tax return:

<table>
<thead>
<tr>
<th>Letter</th>
<th>Name</th>
<th>Relationship to your parent(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A:</td>
<td>__________________________</td>
<td>______________________________</td>
</tr>
<tr>
<td>B:</td>
<td>__________________________</td>
<td>______________________________</td>
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<tr>
<td>C:</td>
<td>__________________________</td>
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<tr>
<td>D:</td>
<td>__________________________</td>
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A household member is someone for whom the head of the household will provide more than 50% of financial support from July 1, 2018 to June 30, 2019. Dependents other than your parent’s biological children and your parent’s spouse must live with them for the indicated academic year.

2. Will your parent(s) provide more than 50% support to the individual(s) listed above for the indicated period?

☐ No. STOP! (The individual(s) does not qualify as household member on the FAFSA. Do not answer the remaining questions. Please sign the certification section located on the back of this form)

☐ Yes. Explain why the individual(s) listed above were not claimed as dependent(s) on the 2016 tax return and how your parent(s) will be providing this individual(s) more than 50% of support.  
______________________________________________________________________________________________
______________________________________________________________________________________________
______________________________________________________________________________________________
______________________________________________________________________________________________
______________________________________________________________________________________________

(Continue on the other side)
3. Did anyone claim the individual(s) listed previously in question #1 on their 2016 federal income tax return?

☐ Yes  ☐ No

Letter(s) from questions #1: ______
Name of Tax Filer: ____________________________ Relationship to Parent: ____________________________

Letter(s) from questions #1: ______
Name of Tax Filer: ____________________________ Relationship to Parent: ____________________________

4. Did the individual(s) listed previously in question #1 file his/her own 2016 federal income tax return(s)?

☐ Yes  ☐ No


5. Was Financial Assistance or Court Ordered Child Support received on behalf of the individual(s) listed in question #1?

☐ Yes - How much was the total amount received in 2016? $____________________
☐ No

6. Will the individual(s) listed in question #1 continue to live in your parent’s household from July 1, 2018 – June 30, 2019?

☐ Yes
☐ No – Please explain below

____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

7. Will you be claiming the individual(s) listed previously on your 2017 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: ____________________________