BRUNSWICK COMMUNITY COLLEGE

2015-2016 PROOF OF SUPPORT FOR DEPENDENT CHILD OR LEGAL DEPENDENT

_____ _____

Last Name First Name MI Student ID

You have indicated on the FAFSA that you have a legal dependent or child that **you** provide more than half support for. Please complete the information below and provide **all documentation** showing that **you** provide at least half support for this child or legal dependent. If the child is not born yet, please provide documentation relevant to the unborn child. **You must provide sufficient documentation to prove support for your child or legal dependent.**

Dependent's Name:_____ Relationship to You:_____ Birthdate:_____
Dependent's Name:_____ Relationship to You:_____Birthdate: _____

I. Provide information on all of the following questions:

1) Where do you (or will you) live while you are in school? _____
   _____
2) Where does the child (or will the child) or legal dependent live while you are in school? _____
   _____
3) Who claims the child or legal dependent on federal taxes? _____
4) Who pays (or will pay) for childcare? (if applicable)? _____
5) Who pays (or will pay) for food? _____
6) Who pays (or will pay) for medical needs? _____

II. Do you receive (or will you receive) any of the following for the child or legal dependent? If yes, submit documentation to support type(s) of aid.

- ☐ WIC / Amount per month: _____
- ☐ Food Stamps / Amount per month: _____
- ☐ Child Support / Amount per month: _____
- ☐ Medicaid / Amount per month: _____
- ☐ Other / Amount per month: _____

III. Submit Required Documentation: Failure to submit all documentation will result in a denial of this appeal.

Child

- ☐ Copy of child's birth certificate (or statement from doctor indicating due date if the child is unborn)

Legal Dependent

- ☐ Signed letter of explanation for legal dependent
- ☐ If your legal dependent has any source of income, provide a list of all sources and amounts of income. Submit a copy of their tax return, social security, and any other source of income as applicable.

IV. Please list the estimated monthly expense for the support of your dependent(s), over and above the support received through any federal programs listed in II above. If living with another individual, list total amounts that is paid in entirety. If paid by student only, provide copies of rent receipts, utility bills, and other documentation in student's name. If required documentation is not submitted, form will be considered incomplete.

Expense	Monthly Amount
Rent	
Utilities (Lights, Water, Phone, Cable)	
Food	
Miscellaneous	

V. Submit Documentation for Both Child and Legal Dependent

- ☐ 2014 IRS Federal Tax Return Transcript and W2(s) and/or 1099(s)
- ☐ Most recent pay check stubs from any and **all** jobs in 2015
- ☐ Copy of lease or rental agreement showing where you and the child or legal dependent live
- ☐ Copy of day care expense (if applicable)
- ☐ Copy of any federal subsidized programs (WIC, Food Stamps, Medicaid, etc.)
- ☐ List all of sources and amounts of income (Child support, parental support, other untaxed income, etc).

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

Certification & Signatures *By signing this information request, I certify that all information is complete and correct.*

_____ _____

Student Signature *Date*