VOTH-1

Student Name	ID#	_ ID#		
Street Address	City	St	ate Zip	
Phone or cell #	E	-mail		

On your 2020-2021 FAFSA you answered "Yes" to one of these questions: "Do you now have or will you have children who will receive more than half of their support from you, now and through June 30, 2021." Or "Do you have dependents (other than your children or spouse) who live with you and who receive more than half their support from you, now and through June 30, 2021?" Since this answer is the only thing that is making you an independent student, please provide the information requested below.

If you have answered this question incorrectly and you do not have a child or other person for whom you provide more than half support, return to your FAFSA to make a correction. Change the relevant answer to "No," and answer the questions about your parent(s). Then you and a parent will have to sign and submit the corrected FAFSA. (No need to return this form then.)

If you do or will provide more than half support for your child or other person, please complete each step below.

**Step 1.** Provide the following information for each person you support.

Name		Date of Birth	<b>Relationship to You</b>		
Step 2.	Submit a signed copy of your <b>20</b> submit W2s and any 1099s that s		u did not have to file for 2019,		
Step 3.	For each of person listed above who has filed or will file a <b>2019 federal tax return</b> , submit a signed copy of that tax return.				
Step 4.	For each person listed above who is older than age 18 and was not required to file a 2019 federal tax return, submit a <b>signed statement from that person</b> that they did not file taxes for 2019 and were not required to file. They should also list the total dollar amount of any wages earned.				

Printed Student Name		Student ID #		
Step 5.	<b>5. Money received or paid on your behalf</b> you, the student, received in 2019. Include example, if someone other than yourself i gift cards, etc., include the amount of that		le support from a signific s paying rent, utility bills	cant other or parent. For
		Name on bill/ Relationship to you		How much paid in 2019?
Rent/Mor	rtgage _			
Utilities (	(water,gas,etc)			
Phone (la	undlines,cell phones)	)		
Car paym	nent			
Insurance	e (auto,health,home)			
Food (est	imate)			
Miscellar	ieous _			

**Step 6.** Additional resources. So we can better understand your financial situation, please provide below any other resources you and your dependent have received in 2019 or 2020. Include such things as federal and state financial aid (including loans), child support, veteran benefits, TANF, SNAP, untaxed Social Security benefits, etc.

<b>Resource Received</b>	Who Received funds	Amount & Year

By signing this form, I certify that all of the information provided is true and complete to the best of my knowledge and agree, if asked, to provide additional information that might be required.

Student signature\_\_\_\_\_

Date\_\_\_\_\_