SOUTH SUBURBAN COLLEGE

Office of
Financial Aid

Legal Dependent

(Other than spouse)

2016-2017

Name: _____ **ID:** _____

Address: _____

City, State, Zip: _____

Legal Dependent Guidelines

You (the student) must provide more than 50% of your dependents financial support during the 2015-2016 award year, to consider the person to be your legal dependent. Complete the worksheet that follows and submit documentation that you are providing over half of your dependents financial support. Please attach the followingdocumentation (if applicable):

1. A detailed chronological statement which clearly explains your family situation and how you financially support your dependent(s).
2. Include in your statement an explanation of who claimed the dependent on their 2015 taxes.
3. Legal birth certificate of your dependent(s).

I certify that this information is true and complete. If I cannot provide the appropriate required documentation to support as an independent status, I understand that I will be evaluated as a dependent student and required to provide my parents income information.

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Signature: _____ **Date:** _____