Clarification of Support for Dependent Students

Student Name (Please print) __________________________ CSUID __________________________

The income listed for parent(s)/stepparent on the FAFSA appears to be low for the family size reported. Provide information from your parent(s)/stepparent regarding all untaxed income received in 2016 to pay bills in the family's name. Values should be reported as annual figures and cover the January 2016 – December 2016 time period. Amounts paid on a family’s behalf can also include any distributions to the student from a 529 plan owned by someone other than the student or the student’s parents, such as grandparents, aunts, and uncles of the student. Fields left blank will result in an incomplete document. Write $0 or N/A, if none.

Please list all annual expenses for 2016:

Rent/Mortgage: $__________
Car Payment: $__________
Food: $__________
Personal/Miscellaneous: $__________
Utilities: $__________
Other (i.e. credit card, health insurance, 529 plan, etc.): $__________

TOTAL FAMILY EXPENSES FOR 2016: $__________

Name of person(s) providing funding to family for 2016 expenses: __________________________

Additional comments…

By signing below, I certify all information provided on this form is complete and correct.

Student Signature __________________________ Date ____________

Parent Signature __________________________ Date ____________