ILLINOIS STATE UNIVERSITY Financial Aid Office

2017 FRM415

2016-2017 Dependent Other Than Spouse/Child Verification Form

The data from your Free Application for Federal Student Aid (FAFSA) indicate that you reported *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, 2017.

Please provide the requested information about your household size and dependents for 2016-2017 and return your completed form to:

Fir	nancial Aid Office, Illinois State	e University, Campus Box 2320, I	Normal IL 61790-2	320.
Stu	dent's Name (please print)	Student	Student's University I.D. Number	
pay rer so	ying more than half that amount mainder of this form. <i>If you are N</i>	a person is your dependent, add up and will continue to do so through word paying more than half the expe contact your financial aid Counselor	June 30, 2017, comp enses and/or will not	olete the continue to do
1.	On your FAFSA, (Question 51) you indicate that you have dependents other than child or spouse. Did you claim this person/persons as dependent(s) on your 2015 Federal income tax return?			Yes □ No □
	 If "Yes," please attach a signed, non-returnable copy of your 2015 Federal income tax return (IRS Form 1040, 1040A, 1040EZ, TeleFile Tax Record (<i>including the Confirmation Number and the filer's signature</i>), a tax return for Puerto Rico or a foreign income tax return) to this form and sign below. If "No," continue to Question 2. 			
2.	Will this person or persons <i>reside with you</i> AND will you provide <i>more than half his/her (their) support</i> from July 1, 2016 through June 30, 2017 ? Yes □ No □ • If "Yes," please provide the following information about your dependent(s) and attach documentation that you provide more that one-half of their support. This documentation could include proof of rent or mortgage payments, receipts for food or clothing, and proof of enrollment in school.			
	Dependent's Name	Dependent's Date of Birth	Social Security	y Number
3.	•	your FAFSA as a dependent stude ertifies that the information given is		
	Student's signature (in black ink)	Today's date	_	