



2020-2021 Proof of Dependent Form

Please read each section carefully and answer ALL questions completely. Also attach supporting documentation. DO NOT LEAVE ANY BLANKS.

Student Name: _____ Social Security # _____
Address: _____
City: _____ State: _____ Zip code: _____

Student Section Claiming dependents under your name

1. Please list the names and ages of YOUR dependents and their relationship to you. You must attach legal documentation of their relationship (e.g., Birth Certificate, Legal Guardianship, etc...).

Dependents are those people that you will support between July 1, 2020 and June 30, 2021. Include your children if they get more than half of their support from you. Include other people only if they meet the following criteria:

- A. they now live with you, and
B. they get more than half of their support from you, and
C. they will continue to get this support from you between July 1, 2020 and June 30, 2021.

Support includes money, housing, food, clothes, car, medical and dental care, payment of college, and similar expenses. You must provide documentation such as receipts to substantiate your claim of support for the persons listed below as dependents.

Table with 3 columns: Name, Age, Relationship

1. Where do the dependent(s) named above live?

- With the student
With the student's parent(s)
Other

If Other is checked, please explain: _____

2. What childcare provisions have you made for while you are in class?

3. You the student will live?

- With your parent(s)
Other

If Other, please explain: _____

4. Were you the student claimed by your parent(s) on their 2018 tax return?

- Yes
No

5. Was your dependent claimed by anyone other than you (the student) on the 2018 federal tax return?
 Yes No
6. Please list **All** sources of your support. You must attach supporting documents (e.g., copies of most recent pay stubs, TANF check, cancelled checks, or proof of child support received, WIC program eligibility notice).

Parent Section	Parents who are claiming dependents other than their own child(ren)
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7. Please list the names and ages of YOUR dependents and their relationship to you. You must attach legal documentation of their relationship (e.g., Birth Certificate, Legal Guardianship, etc...).

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Name	Age	Relationship

1. Please provide a written statement detailing how it is that you provide over 50% of their support.

Submit this worksheet to the Office of Financial Aid

You may now upload your documents by setting up an account on BOX by going to https://account.box.com/login?redirect_url=/ .

Name your folder by your 7-numeric Marymount student ID number, then use the email address faid@marymount.edu to share your folder on BOX. If you do not know your Marymount Student ID number, please name your folder by last name.

Once complete, choose the “EDITOR” option. If you are re-uploading a new document on BOX, please re-share your folder as “EDITOR” using the same email above. If you need further assistance in regards to BOX, please go to <https://support.box.com/hc/en-us>.