

Proof of Child/Dependent 2023-2024

We have reviewed your Free Application for Federal Student Aid (FAFSA) and find that we need additional information.

Your 2023-2024 financial aid application indicates that you have at least one dependent child. To claim the child/children as a legal dependent for financial aid purposes, you must currently be providing more than half of their support and continue to do so through June 30, 2024. Support includes housing, food, money, car, clothes, medical and dental care, daycare, insurance, etc. If the child does not live with you, you must still be able to document that you pay more than half of their support.

If you are unable to provide appropriate documentation demonstrating you provide more than half of the support for your child, please correct your FAFSA at www.fafsa.gov, under the Dependency Status Tab, the question "Do you have or will you have children who will receive more than half of their support from you" will need to be changed to "no" which will change your dependency status and you will be required to provide parent financial information on the FAFSA.

A determination of your dependency status will be made upon review of this form. This decision is final and is not appealable.

S	Student Name (Last) (First) (MI)		Student ID Numbe	er
N	Name of student's dependent	Age	Relationship to student	
De	etails of Support			
1)	Where are you currently living?own home;Other		nt(s)	
2)	Where is your child currently living?with you the	e student;	_with the student's	parents?
3)	Will your child live with you while you attend Lake Reg	gion State Colle	ge?Yes;	No
4)	Do you pay child care costs for your child? Yes	s \$/n	nonth;No	
	If yes, who do you pay (attach proof of payment)			
5)	Do you provide medical coverage for your child?	Yes;	No	
	If yes, provide a copy of the medical card and copy of r	monthly payme	ent invoice	
	If no, who provides medical coverage?			
6)	Do you receive child support for your child? Yes	s\$/mo	nth;No	
	If yes, submit supporting documentation.			
7)	Do you pay child support for your child?Yes \$	/month;	No	
	If yes, submit supporting documentation.			
8)	Do any of your (or your dependent's) relatives provide	you financial s	support?Yes;	No
	If yes, who provides the support and how much per me	onth?		

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9) Do you or your child (or other dependents) receive any other type of assistance or benefits?

(ex. Social security, Housing Assistance, SNAP	benefit, etc.)? _	Yes \$	/month;	No				
Type of assistance:			·					
Did someone else claim you as a dependent o				No				
If yes, who claimed you?								
Did someone else claim your child on a 2021 F	Federal tax retur	n? Yes; _	No					
If yes, who claimed the child?								
) Will you claim yourself on your 2021 Federal t								
If no, explain why?								
) Will you claim your child (or other dependent) on your 2021 F	ederal tax returr	n? Yes;	No				
If no, explain why?								
If no, explain why?Yes;Yes;	No							
If yes, submit a copy of your most recent pay	stub and 2021 F	ederal Tax Retur	n, Form 1040 a	and all applicable				
schedules. If no, or your annual 2021 income	is less than \$17,	420, provide the	following hou	sehold monthly l	iving			
expenses which are billed in your name. Attac	ch a statement i	ndicating how yo	ou provide for	each of these exp	enses			
Housing (mortgage, rent, other	\$							
Utilities (electricity, gas, water)								
Food	\$							
Phone/Cable	\$							
Transportation (Insurance, gas, car pymt)	\$							
Total Monthly Expenses	\$							
f the legal dependent is your child, you must submit a copy of the child's official birth certificate from the Bureau o								
Vital Statistics for the state in which the child was born along with any legal documents which provide information								
on the child's financial and living circumstances.								
Certification:								
I hereby certify that all information contained in this document, including supporting documentation, is true and								
complete to the best of my knowledge.								
Students Signature		<u></u>	ate					
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Please submit this documentation and all other documents requested to the Financial Aid Office at:

- Mailing address: Lake Region State College
 Financial Aid Office
 - 1801 College Drive N Devils Lake, ND 58301
- Phone: 1-800-443-1313 Ext 1516 or (701) 662-1516 E-mail for questions: <u>merissa.b.lourens@lrsc.edu</u> Fax: 701-662-1666