

UNIVERSITY OF MINNESOTA MORRIS

STUDENT WITH DEPENDENT(S)

This form is used when additional documentation is required to support responses provided on the Free Application for Federal Student Aid (FAFSA).

One Stop Student Services
105 Behmler Hall
600 East 4th Street
Morris MN 56267-2132

Complete this form using black or blue ink and return it to the One Stop with all required documentation. Include your name and student ID number on any additional documents. Processing of your financial aid is on hold until this information is received.

320-589-6046
Fax: 320-589-1673
ummonestop@morris.umn.edu

| Student Information | |
|--|-------------------|
| Preferred Name | Student ID Number |
| Primary/Legal Name (last, first, middle initial) | Phone Number |

Dependent(s) Information

Do you now have or will you have children who will receive more than half of their support* from you between July 1, 2020 and June 30, 2021?

Yes, I will provide more than half of the support for my children or will be for my unborn children. List children/unborn children below. If you are including unborn children, submit documentation from a medical professional indicating your name and the expected due date.

No, I will not provide more than half of the support for my children or unborn children. I understand a correction will be made to my FAFSA.

Do you have dependents (other than your children or spouse) who live with you and who receive more than half of their support* from you between July 1, 2020 and June 30, 2021?

Yes, I will provide more than half of the support for dependents other than my children. List dependents below.

No, I will not provide more than half of the support for any dependents other than my children. I understand a correction will be made to my FAFSA.

* Support provided by you includes: child care assistance, MFIP Benefits (Minnesota Family Investment Program), SNAP (Supplemental Nutrition Assistance Program), TANF (Temporary Assistance for Needy Families), WIC (Special Supplemental Nutrition Program for Women, Infants, and Children), Supplemental Security Income, child support, welfare, rent, insurance, utilities, etc.

Independent student household includes:

- yourself.
- your spouse, if you are married.
- your or your spouse's children, if you or your spouse will provide more than half of their support from July 1, 2020 through June 30, 2021, even if the children do not live with you.
- other people if they now live with you, and you or your spouse will provide more than half of their support from July 1, 2020 through June 30, 2021.

Include the name of the college for any household member who will be enrolled at least half-time in 2020-2021 in a program that leads to a college degree or certificate at an eligible postsecondary educational institution. If more space is needed, provide a separate page with your name and student ID number at the top.

| First and Last Name | Age | Relationship | College |
|---------------------|-----|--------------|--------------------------------|
| | | Self | University of Minnesota Morris |
| | | | |
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| | | | |

Certification

By signing this form, I certify that all the information reported is complete and correct.

| | |
|-------------------|------|
| Student Signature | Date |
|-------------------|------|

Office of Financial Aid Use Only

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|-----------------------------------|---------------------------------------|
| <input type="checkbox"/> Eligible | <input type="checkbox"/> Not Eligible |
|-----------------------------------|---------------------------------------|