

Documentation of Independent Status Worksheet

“Child”

Blue Mountain College, Office of Financial Aid, P O Box 160, Blue Mountain, MS 38610

You listed on your FAFSA that you have a child and/or children you support. In order to qualify for financial aid as an independent student, the child and/or children must meet the following requirements:

- They must currently receive more than half of their support from you
- They must continue to receive more than half of their support from you from July 1, 2020 to June 30, 2021.

Student Information

Name: _____

BMC ID: _____

Phone/Email _____

Information of other Individual(s) being supported

Print the name, age, SSN and relationship of the child and/or children you support.

Name	SSN
_____	_____
Age	Relationship (to provider)
_____	_____

Address where this person resides:

1. When did the person listed above begin living at this residence? _____

2. Who owns the home or pays the rent? _____

3. Amount paid monthly? _____

4. Who pays the utility bills for the residence? _____

5. Amount paid monthly? _____

6. From what sources is this support being paid? _____

7. When did support begin? (mm/dd/yyyy) _____

8. When will support end? (mm/dd/yyyy) _____

Information on person being supported - continued

Estimated Monthly Expenses SUPPORTER pays for the PERSON BEING SUPPORTED ONLY

Expense	Amount Paid
Food	_____
Clothing	_____
Medical/dental	_____
Personal care	_____
Other	_____

Does the person listed above receive any other income in their name or on their behalf **per month** (Social Security, Supplemental Benefits, Retirement Pensions, VA Benefits, Alimony, Child Support, Workers Comp, TANF, Food Stamps, Savings, Certification of Deposit, other)?

Yes _____

No _____

If yes, please list:

	<u>Type(s) of Income</u>	<u>Amount</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____

By signing this form, you agree that it is complete and true. You also agree to provide information that will verify the accuracy of your information, if requested.

Student Signature: _____

Date: _____