

Printed Name:

Social Security #:

Palomar ID #:

2007-2008

PALOMAR COLLEGE FINANCIAL AID

Proof of Dependent form

Your 2007-2008 financial aid paperwork states that you are supporting legal dependents. We must verify your claim meets federal financial aid regulations. Any person you claim as your *dependent* must meet the following criteria:

Include:

- **Your children** if you will provide more than half of their financial support* between July 1, 2007 and June 30, 2008.
- **Other people if they**
 - **currently** live with you, *and*
 - **currently** get more than half their financial support from you, *and*
 - **will continue** to get this support from you between July 1, 2007 and June 30, 2008.

*****Support** includes money, housing, food, clothing, medical, & dental care; payment of college costs, & similar expenses. ***

Please answer ALL questions carefully and **attach supporting documentation.**

INFORMATION ABOUT YOU

1. Will you be claimed as a tax exemption by another person for the 2007 tax year? YES NO

If YES, by whom?

Name:

Relation:

2. Where are you living (family, own, roommate, etc.)

3. List all sources and amounts of monthly income you will receive during the 2007-2008 school year:

| Source | Amount |
|--|---------------|
| Wages from work (<i>attach recent proof</i>) | \$ |
| Child Support | \$ |
| Other _____ | \$ |
| Other _____ | \$ |
| Total Monthly Income | \$ |

INFORMATION ABOUT THE DEPENDENT

Use separate form for each additional dependent

Name:

Relationship:

Age:

1. Will you claim this dependent for the 2007 tax year? Yes No

If No, tell us who will claim the dependent below: (if due to divorce settlement, attach copy of decree).

Name:

Relationship:

2. List the sources and amounts of monthly income and or benefits received by or for this dependent:

| | |
|---|----|
| Social Security benefits | \$ |
| Veterans benefits | \$ |
| Other _____ | \$ |
| Other _____ | \$ |
| Earned Wages | \$ |
| <i>(if the dependent is 16 years of age or older--attach proof)</i> | |

If the dependent requires child care, what provisions have you made or will make for the time you are in class during the 2007-2008 school year?

Name of provider:

Monthly Amount Paid \$:

Student Signature: _____

Date: _____