

DOSU

Dependent Document of Support Form  
2009-2010

Student's Name: \_\_\_\_\_

University ID:     -

In order to include an individual in your parent's household, your parent must provide more than 50% of his/her support from July 1, 2009 to June 30, 2010. Please use this form to indicate how this individual intends to pay for his/her expenses during this time. Note that support includes money paid directly to the individual, money paid on his/her behalf, as well as living space provided free of charge. You must indicate a dollar amount in the "Value of Support" column.

Documentation of Support for: \_\_\_\_\_

Expenses	Source of Support (please list)	Value of Support
Example: Housing	Self: Part-time employee at bookstore	\$ 300 /mo
Education		\$ /mo
Housing		\$ /mo
Utilities		\$ /mo
Food		\$ /mo
Transportation		\$ /mo
Personal		\$ /mo
Other		\$ /mo
<b>Total Support Received</b>		<b>\$ /mo</b>

Will this individual attend college in 2009-2010? Yes \_\_\_\_\_ No \_\_\_\_\_

Will/Did this individual apply for financial aid aid for 2009-2010? Yes \_\_\_\_\_ No \_\_\_\_\_

If you answered yes, please submit a copy of the financial aid award letter.

Will this individual live with your parents? Yes \_\_\_\_\_ No \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_