



Dependent Child Form 2017-18

Student's Name _____
k-number _____ Phone number _____

Please supply the information below to reflect the household's **2017 income** and provide a better understanding of how the household is supported.

Household Information

➤ **Do you live with your parents?**

___ **YES:** please return to your FAFSA at www.fafsa.gov and change your response to "No" for the question(s) "Do you now have or will you have children who will receive more than half of their support from you..." and/or "Do you have dependents other than children..." You will then be directed to add parent information to your FAFSA. Once your corrections have been received (3-4 business days) the One Stop Office will notify you if additional steps are required.

___ **NO:** please fill out the below information and **return with documentation of the source(s) of income.**

| 2017 Income per Month | |
|---|-----------------|
| Household Income Earned from Work | \$ |
| Child Support/Alimony | \$ |
| Housing Allowance (HUD) | \$ |
| Social Security Benefits | \$ |
| Unemployment Benefits | \$ |
| AFDC | \$ |
| FIP, TANF | \$ |
| SNAP | \$ |
| WIC | \$ |
| Cash Support from Others | \$ |
| Total per month | \$ |
| 2017 Total Monthly Income x 12 = | \$ _____ |

If you are unable to provide the documentation requested above, please explain your living situation (i.e., who pays for housing, utilities, food, etc.).

By signing this worksheet, I certify that all the information reported to qualify for Federal Student Aid is complete and correct.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

Student _____ Date _____

Please return this completed form to Kirkwood Community College along with any other requested materials:
Fax: 319-398-4928 | Email: onestop@kirkwood.edu
KCC One Stop Office, 6301 Kirkwood BLVD SW, Cedar Rapids, IA 52404