

## 2019 -2020 DEPENDENT SUPPORT STATEMENT

| Student Name  | Student ID  |   |
|---|---|---|
| Federal regulations require you to certify that you dependent(s) during 2018 and will continue to includes but is not limited to the following: payr other expenditure for the children or dependent(s) dependent for the 2019- 2020 school year. | provide support during the ments for housing, food, clo | 2019-2020 school year. Support thing, child support payments or |
| _   | ianship (Court Documents)<br>From Physician)            |   |
| I did and will provide 50% support for my o   | children or legal dependent(s)                          | ).  |
| List Dependents below:  |   |   |
| Children or Legal Dependent Name  | e Last Four of SSN                                      | Age   |
|   |   |   |
|   |   |   |
| I did not and will not provide 50% support please update your FAFSA to reflect "No –  | •   | endent(s). (If you mark this box,                               |
| I certify that all of the information rep   | ported above is accurate to the                         | e best of my knowledge.   |
| Student Signature:  |   |   |

Please return all forms via mail, email or fax, to the Office of Financial Aid at: 2404 N. Grand Ave. Tyler, Texas 75702 Fax: (903) 593-9607 Email:financialaid@texascollege.edu