

On your FAFSA, you indicated that you are independent because you have a dependent who will receive more than half of their support from you during the 2025-2026 academic year. This form is required to verify the information from your FAFSA application.

Student Information:							
Name:		SCCC ID:					
Address:		Telephone:					
	(Include City, State and Zip Code)						

Dependent Information:

Please select one of the following:

I have a child who will receive more than half of their support from me from July 1, 2025 to June 30, 2026.

I have dependents, other than a child or spouse, who will receive more than half of their support from me from July 1, 2025 to June 30, 2026.

Please list the names and ages of your dependents and their relationship to you:

Name of Dependent	Age	Relationship to You	Will this person live with you from 7/1/2025 – 6/30/2026	
			Yes	🗌 No
			Yes	🗌 No
			Yes	🗌 No
			Yes	🗌 No

Ple

ease	answer all questions below:
1.	Where do you currently live? Off-campus (own home/apartment) With Parent(s)
2.	Are you currently employed? 🗌 Yes 🗌 No
3.	To qualify as an independent student with a legal dependent, you must currently be making at least \$15,650 in the current academic year.
	Are you making the minimum salary required? Yes No If yes, what is your <u>monthly</u> gross income? \$
	If no, explain how you support the children/dependents more than 50%:
4.	Did you claim the children/dependent(s) on your 2024 Federal Tax Return? Yes No
	If yes, submit a copy of your 2024 tax return showing dependents claimed on tax return.
	If no, who claimed (or will claim) the dependent(s)?

Do you **receive** child support for the dependent(s)? No Yes: <u>Monthly</u> amount: 5. \$

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Supporting Documentation:

Please submit the following documents, if applicable. These suggested documents will help us make a determination regarding your dependency status. We reserve the right to ask for additional documentation verifying support.

Recent paystubs verifying employment earnings.

Most recent Federal tax returns showing you claim the children/dependents.

Documentation of child support received/paid.

Documentation of TANF/WIC/SNAP or other federally subsidized programs in your name for the dependent(s).

Legal court documents.

Student Signature and Certifications

Please select one of the following:

I **provide** at least 51% support for the dependent(s) listed on this form and have attached documentation of support

□ I **do not provide** at least 51% support for the dependent(s) listed on this form.

I understand that I must visit studentaid.gov and update my 2025-2026 FAFSA to include my parent(s) information.

I understand I must contact my home campus financial aid office after my FAFSA corrections have been submitted.

Student Signature

Date

Please return completed form and supporting documentation, if applicable, to your home campus Financial Aid Office.

Central Administration

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(631) 451-4108

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