

A. Student Information (please print clearly)

Office of Financial Aid and Scholarships

3300 Century Avenue North White Bear Lake, MN 55110 Phone: 651-779-3305

Fax: 651-779-5816 E-mail: finaid@century.edu

2024-25 Verification of Dependent You Support (other than your children or spouse)

Independent

Your FAFSA application was selected by the U.S. Dept. of Education for review in a process called "verification." In this process we are required by federal law (34 CFR, Part 668) to compare the information from your FAFSA application with the information provided on this form. If there are differences between your application information and your verification documents, we may need to correct your FAFSA information. We cannot process your financial aid until verification has been completed. Please provide the required documents as soon as possible.

Last Name	First Name	M.I.	Student ID Number or Star ID		
Email Address		Phone Number (include area code)			
Ac	ddress		City	State	Zip Code
B. Family Information			,		'
You reported on your FA	FSA that you have a dependent	you support (other	than your children or s	spouse) *	
You must also prov dependent.	ide court documents shov	wing proof of y	our legal guardia	nship for the belov	v named
Name of dependent:			Dependent's age:		
Relationship to you:					
Does this dependent live	e in your home? Yes	No			
What income or other re	sources do you have available to	o support you and y	our dependent (i.e., e	arnings, MFIP, food sup	port).
Name of Income Source				Amount	
C. Signatures					
Ť	osely give false or misleading ir	ıformation, you ma	y be fined, sentenced	to prison, or both.	
WARNING: If you purp	osely give false or misleading ir e information reported on this	•	•	to prison, or both.	

^{*}If you answered YES to this question in error on your FAFSA, you are not independent for financial aid purposes. You will need to go online to www.fafsa.gov to correct your FAFSA and add parental information including a parent signature (FSA ID).