2023-2024 V5 Dependent Verification Packet

A. Personal Information

Stu	denltD#	Date oBirth					
Stu	derltegaName						
Mai	lin g Addres <u>s</u>			Apartr	ment/Spac <u>e</u>	#	
City	,		Stat <u>e</u>		_Zip		
Cell	ula P hone <u>#</u>		_HomePhone #				
Nap	oà/alle ∕ Colleg € tuder ⊞ maiAd	ddres <u>s</u>					
1.		nge 13werebothyourparentslecease yes to this question, do not comp			No Financial <i>A</i>	Yes sids@dficeeeorfur	ther
2.	Atanytimesince yoturneda 2a)	age13,wereyou adependerotrwardol	thecourt?	No	Yes		
3.	Wherewill volliveduring the 2	20222023schoovear(Julv1,2023.thro	ouahlune30.20243				

Wherewill youiveduring the 2022 2023 schooly ear (July 1, 2023 through June 30, 2024)
 Withmy parents In myowrhouse / apartment With relative 6 DC BT -0.002 you

	/benefits theyceive.	o please indicate if t		
· ·	Student's Tax Forms and Income Information			
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_	heck one box below that applies to you and attach reductive nets.			
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D. Parents' Tax Forms and Income Information

9. Check the box below that applies to the parent's and attach requirements.

The Parent (s) sed the IRSD at a Retrieval Tool (IRSDRT) in FAFS A on the Webto

