

Please return this form to:

Wilmington College Pyle Box 1184 1870 Quaker Way Wilmington, OH 45177 937.382.6661 x600 wilmington.edu sos@wilmington.edu

2024-2025 DEPENDENT STUDENT SUPPORT VERIFICATION FORM

STUDENT NAME: STOURN TID: Your application has been selected for verification. We are required by federal law (34 CFR, Part 668) to compare the information from your Free Application for Federal Student Aid (FAFSA) with the information on this form. PLEASE NOTE: Y We cannot continue processing your financial aid until all required financial aid documents have been submitted. All required documents must be uploaded to your Financial aid until all required financial aid documents have been submitted. All required documents must be uploaded to your Financial aid Student Self-Service Portal. We will update your FAFSA, if needed, based on the information provided on this form. SECTION B SUPPORT You institute the provided on the FAFSA HART YOU HAVE A LEGAL DEPENDENT OR CHILD THAT YOU PROVIDE MORE THAN HALF OF THE DEPENDENT'S SUPPORT SERVICE YOUR PROVIDE MORE THAN SOX SUPPORT FOR YOUR CHILD THAT YOU PROVIDE MORE THAN HALF OF THE DEPENDENT'S YOU MUST PROVIDE SUPPORT FOR YOUR CHILD OR LEGAL DEPENDENT. SUPPORT INCLUDES HOUSING, FOOD, MEDICAL CARE, CLOTHING, ETC. 1. DEPENDENT'S NAME AGE RELATIONSHIP TO STUDIES HOUSING, FOOD, MEDICAL CARE, CLOTHING, ETC. 1. DEPENDENT'S NAME AGE RELATIONSHIP TO STUDIES HOUSING, FOOD, MEDICAL CARE, CLOTHING, ETC. SIGNED IF THE OF EXPLANATION FOR LEGAL DEPENDENT. CHILD, UPLOAD WITH THIS DOCUMENT: **OF OF OF CHILD'S BRTH CERTIFICATE.** SUPPORTING DOCUMENTS NEEDED: SIGNED IF THE OF EXPLANATION FOR LEGAL DEPENDENT. **OF IT YOUR LEGAL DEPENDENT, UPLOAD WITH THIS DOCUMENT: **OF IT YOU LIES WHILE YOU ARE IN SCHOOL?** 4. WHICH CLAIMS THE CHILD/LEGAL DEPENDENT TO FILE TAX RETURN, SOCIAL SECURITY, AND ANY OTHER SOURCES AND AMOUNTS OF INCOME. 2. WHERE DOSA/MIL THE CHILD/DEPENDENT TO FILE TAX RETURN, SOCIAL SECURITY, AND ANY OTHER SOURCES AND AMOUNTS OF INCOME. 2. WHERE DOSA/MIL THE CHILD/DEPENDENT TO FILE TAX RETURN SOCIAL SECURITY, AND ANY OTHER SOURCES AND AMOUNTS OF INCOME. 3. WHERE DOSA/MIL THE CHILD/DEPENDENT TO FILE TAX RETURN SOCIAL SECURITY, AND ANY OTHER SOURCES AND	SECTION A: STUDENT INFORMATION						
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