

Worksheet for Determining Support 2020-2021

On the Free Application for Federal Student Aid (FAFSA), you indicated that you are an independent student because you have a dependent(s) for whom you provide over half of their support. In order to demonstrate that you will be providing more than half the support for this individual(s) from July 1, 2020 through June 30, 2021, you must complete this worksheet. If you are living with your parent(s), you may be asked for additional information.

Name: _____ Student or STAR ID _____

Email Address: _____ Phone Number _____

Resources: Indicate the monthly amount of resources that you are currently receiving below.

	Monthly Amount
1) Income from work	\$ _____
2) Welfare Benefits (cash benefits from TANF, MFIP)*	\$ _____
3) Social Security Benefits*	\$ _____
4) Housing Assistance, food stamps, and/or WIC*	\$ _____
5) Child Care Assistance from County*	\$ _____
6) Monetary Support from other individuals	\$ _____
7) Other Funding (Veteran benefits, financial aid, etc.)	\$ _____

*These sources of income will not be included as income on your FAFSA application. It is being collected for informational purposes only.

Expenses: Answer this section for the total monthly household expenses and the amount of those monthly expenses you are paying.

	Monthly Household Expense	Monthly Amount You Pay
1) Monthly rent/mortgage payment	\$ _____	\$ _____
2) Food	\$ _____	\$ _____
3) Utilities (heat, electric, water, gas)	\$ _____	\$ _____
4) Health Insurance	\$ _____	\$ _____
5) Clothing	\$ _____	\$ _____
6) Child Care Expenses	\$ _____	\$ _____
7) Medical Expenses	\$ _____	\$ _____

Is the dependent living in your household? Yes _____ No _____ If **“Yes”** skip A and B.

A. What is your relationship with the dependent: _____

B. What is the amount of monthly support the dependent is receiving from the individual with whom they live: _____

I CERTIFY THE ABOVE RESPONSES ARE CORRECT.

Student Signature _____ Date _____

Return by mail, fax or email:

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