



CERTIFICATION OF SUPPORT FOR DEPENDENT(S)

Student Name: _____

Student Number: _____

Enter the **ANNUAL** totals below itemizing, in dollar amounts, how you will be supporting yourself AND provide more than 50% of dependent(s) financial support during the current academic year.

I certify that I will provide more than 50% of support for the following dependent(s) during the current academic year:

1. _____ 2. _____

3. _____ 4. _____

Category

Annual Amount provided

Mortgage Payment or Rent: \$ _____/year

Utilities (lights, water, phone, cable, gas) \$ _____/year

Groceries \$ _____/year

Transportation (car payment, insurance, gas) \$ _____/year

Living allowances \$ _____/year

Total of all categories to support yourself and your dependent(s) \$ _____

Student Signature: _____

Date: _____