

Student's Name \_\_\_\_\_

RCBC ID # \_\_\_\_\_

Complete this form if one or more of the individuals listed in your parent's household would be considered independent for financial aid purposes such as a grandparent or a sibling who is 24 years of age or older.

**Check the box that applies to the parent(s) whose information was reported on the FAFSA and the other adult(s) whose information was reported on the Verification Worksheet:**

- The parent(s) of the student listed at the top of this form have **NOT** provided and **will NOT** provide more than 50% of \_\_\_\_\_'s support from July 1, 2020 through June 30, 2021 (the 2020-2021 academic year).
- The parent(s) of the student listed at the top of this form **have provided** and will continue to provide more than 50% of \_\_\_\_\_'s support from July 1, 2020 through June 30, 2021.
- Attached is proof of \_\_\_\_\_'s **2018 income (tax return transcript, W2 forms, 1099-MISC forms, SSA-1099 form, etc.)**.
- \_\_\_\_\_ was not employed in 2018 and had no source of income including Social Security benefits.

**Certification: ALL PARTIES MUST COMPLETE THE CERTIFICATION BELOW**

By signing this worksheet, I certify that all the information reported is complete and correct. I understand if I purposely give false or misleading information on this worksheet that I may be fined, sentenced to jail or both. I also understand that RCBC may request additional documentation to verify the above information. **Note:** If you are a dependent student, you and a parent must sign this form.

\_\_\_\_\_  
Student Signature\_\_\_\_\_  
Date\_\_\_\_\_  
Spouse Signature\_\_\_\_\_  
Date\_\_\_\_\_  
Parent Signature\_\_\_\_\_  
Date