Office of Financial Aid / Page Hall 2nd Floor / P.O. Box #668 Langston, OK 73050 / 405-466-3000 / financial@langston.edu



2023-2024 Dependent
Verification of
Support

Date:_____

Please use BLACK ink ONLY

	Name:		LU Student ID: A
	Date of Birth:		Phone Number:
This form is being requested because your 2021 income as reported on your Free Application for Federal Student Aid (FAFSA) is exceptionally low. Please complete the chart below to document how your living expenses are paid. YOU ARE A DEPENDENT STUDENT AND ARE REQUIRED TO PROVIDE PARENT INFORMATION ON THE FAFSA, THEREFORE YOUR PARENT MUST COMPLETE SECTION A.			
A. PARENT'S INFORMATION (MUST PROVIDE PROOF OF ANY STATE AND/OR FEDERAL ASSISTANCE) Use this chart to document how your parent(s) pay their basic living expenses.			
	2021 Expenses	Annual Amount I	How is this expense paid? Example: pay check, loans, Pell grant, child support, social security/SSI, etc.
Rent or	r Mortgage	\$	•
Utilitie	es	\$	
Food and Groceries		\$	
Car Pa	yment/Gas	\$	
Insurance		\$	
Child (Care/ Day Care	\$	
Diaper	s and Baby Food	\$	
	al- clothing, cell phone, inment, etc.	\$	
Source(s) of Untaxed Income Received:Amount \$			
B. ADDITIONAL INFORMATION Please, use this space to provide additional information about how your living expenses are paid:			
Studen	ıt's Signature		Date:

Parent's Signature