

## **Student Information**

Name:

Phone:

1. What is the birth date of your dependent(s)?		
2. Who claimed/will claim you as a tax exemption in:	2015	2016
3. Who claimed/will claim your dependent(s) in:	2015	2016
4. Who provides medical insurance for: You	Υοι	ur Dependent
5. Please estimate your income for 2016:		\$
6. Who pays for day care expenses for your dependent(s)?		
<ul><li>7. Did you receive child support in 2015? If yes, how much from whom?</li><li>8. Will you receive child support in 2016? If yes, how much from whom?</li></ul>	\$ and	
9. How much child support did you/will you pay in:	2015	2016
10. Did you receive financial support for food, housing or o	ther basic subsistence	e for your child or yourself in
2015? If yes, how much and from whom?		
11. Will you receive financial support for food, housing or of	ther basic subsistence	for your child or yourself in
2016? If yes, how much and from whom?		
12. Where will you and your dependent be residing while you on-campus Off-Campus, alone with my dependent. With Parents, If living with parents, how much will you off-Campus with a person who provides support for Off-Campus with others who are not providing suppomy dependent does not live with me: Explain	ou contribute for rent, or your dependent and/or ort for you or your dep	or you.
tudent Signature:	Date:	

Barton ID:

Email:

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