

Bear ID
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## 2024-2025 Dependent Verification Form

## **Family Size Information**

Between July 1, 2024 and June 30, 2025 - who will your custodial parent(s) support?

- Include yourself & your custodial parent(s).
- Include your parent(s) other dependents if they get more than half of their support from your parent(s).
- Include other people if: they now live with your parent(s) and get more than half of their support from your parent(s) and will continue to receive that support between July 1, 2024 and June 30, 2025.

Full Name	Age	
		Relationship to Student
		Self
		(Contributor) Parent/Stepparent 1
		(Contributor) Parent/Stepparent 2

## COMPLETE BOTH SIDES AND SIGN ON REVERSE SIDE

## **Federal Tax Return Information**

Student	Tax Status Statement Check applicable box(es)		Parent(s)
	Tax Data was successfully transferred		
	Data did not transfer from IRS:  • Submit an official IRS Tax Return Transcript for and student)	all contributors (parents	
	I (Student) did not and am not required to file a 2022 fe  • 2022 Wages earned by student: \$  Attach all W-2's	ederal income tax return.	×
×	I/We (parents) did not and were not required to file a 2 return. Submit all 2022 W-2 forms for both parents listed		
Income	received from the following sources (Please cl	heck appropriate boxes	s below)
tudent			Parent(s
	Welfare benefits, Temporary Assistance for Needy Familie	es (TANF), Subsidized Housi	ng
	Social Security Benefits that were not taxed		
<ul><li>All no</li><li>You s</li><li>For as</li><li>It is in</li></ul>	mperative that you continue to monitor and check your antifications are sent via BSU email, which is the official me hould frequently check your financial aid status via the stassistance logging in to your account, contact the IT Help Important to notify the Financial Aid Office of changes in erces, as these could result in an award adjustment.	ans of communication at BS audent portal, INFOBEAR. Desk at 508-531-2555.	
ilure to s U funds.	ubmit this completed, signed document in a timely	manner could result in a	loss of
ertify that	Certification all information submitted with and written on this applica hay be made based on data provided. An actual signature otable.	•	
udent Sign	Date: ature	WARNING: If you purposely misleading information on t you may be fined, be senter	his worksheet

Forward this completed form along with any supporting documents to: Financial Aid Office, Bridgewater State University, 45 Plymouth Street, Bridgewater, MA 02325

Date:

Signature of one parent (contributor) who is reported on the FAFSA

both.