

Bear ID
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## 2026-2027 Dependent Verification Form

Your application has been selected for verification. You and your parent(s) must provide the following

## **Family Size Information**

Between July 1, 2026, and June 30, 2027 - 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, 2026, and June 30, 2027.

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(os)	Parent(s)
	Check applicable box(es)  Tax Data was successfully transferred	
	Data did not transfer from IRS:  • Submit an official 2024 IRS Tax Return Transcript or signed 1040 including schedules for all contributors (parents and student)	
	I (Student) did not and am not required to file a 2024 federal income tax return.  • 2024 Wages earned by student: \$  Attach all W-2's	×
×	I/We (parents) did not and were not required to file a 2024 federal income tax return. Submit all 2024 W-2 forms for both parents listed on the FAFSA.	
	received from the following sources (Please check appropriate boxes	_
Student	Source(s) Welfare handite Targery Assistance for Needs Families (TANE) Cubaidized Herri	Parent(s)
	Welfare benefits, Temporary Assistance for Needy Families (TANF), Subsidized Housing Social Security Benefits that were not taxed	ng □ □
❖ It is i	mperative that you continue to monitor and check your award status.	-
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Forward this completed form along with any supporting documents to: Financial Aid Office, Bridgewater State University, 45 Plymouth Street, Bridgewater, MA 02325