



# DEPENDENT CONSIDERATION IN HOUSEHOLD 2021-2022

(DCH22)

**INSTRUCTIONS:** Upon review, the inclusion of one of you/your parent's dependents as part of your household may or may not be considered. Fill out this form only if you indicated on the Verification Worksheet that you and/or your parent(s) are providing at least half support for this person.

## A. Student Information

Student Name: \_\_\_\_\_ CBU ID Number: \_\_\_\_\_

SSN (Last Four) **XXX-XX-** \_\_\_\_\_ Phone Number: \_\_\_\_\_

## B. Additional Information

Dependent's Name: \_\_\_\_\_ Relationship to you/your parent(s): \_\_\_\_\_

1. Reason that this person lives with you/your parent(s) and why you/your parent(s) is providing support:

\_\_\_\_\_  
\_\_\_\_\_

2. Does this person have any income?  Yes  No

Type of Income	Amount
Wages	\$
Social Security	\$
Retirement	\$
TANF Benefits	\$
Disability	\$
Other	\$

3. Did this person file a **2019** Federal Income Tax Return?

Yes  No

*(If Yes, attach a copy of their IRS Tax Return Transcript)*

4. Type of support you and/or your parent(s) provide for this person:

Type of Support	Amount
Rent	\$
Car Insurance	\$
Car Payment	\$
Utilities	\$
Clothing	\$
Food	\$

STUDENT NAME

STUDENT SIGNATURE

DATE

PARENT NAME

PARENT SIGNATURE

DATE

**Parent information is required for dependent students only. Independent students should only report their own information.**

**CHRISTIAN BROTHERS UNIVERSITY OFFICE OF FINANCIAL AID**

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