CHILD'S PROOF OF DEPENDENCY AFFIDAVIT

| Dependent' | 's Name Dependent's 7-Digit Stud | ent ID Number |
|----------------|---|----------------|
| I certify that | t the above-named child, while not my tax dependent, is: | |
| Please | e check the appropriate box under Section A and Section B | |
| A | My son or daughter (either natural or legally adopted), | |
| | OR | |
| | My stepson or stepdaughter, | |
| | OR | |
| | The son, daughter, stepson, or stepdaughter of my domestic partn within the household of the domestic partnership | er and resides |
| | OR | |
| | A child who has a court-appointed legal relationship with me, or m partner (i.e. adoption, guardianship, foster child) and who is a men household | • |
| AND | nousenoid | |
| В | A child for whom I provide over one-half of his/her support; | |
| | OR | |
| | A child who: | |
| | a) receives over one-half of his/her support from parents | s who are |
| | divorced, separated, or living apart, and b) is in the custody of one or both or his/her parents for half of the calendar year; | more than one- |
| | OR | |
| | A child who: | |
| | a) receives over one-half of his/her support from parents | s (but neither |
| | parent contributes over one-half of the support), b) | |
| | | |