



**Office of Financial Aid**  
**Dutchess Community College**  
**Orcutt Student Services Center/ Room 104**  
**(845) 431-8030/Fax (845) 431-8603**  
**Email: [financial-aid@sunydutchess.edu](mailto:financial-aid@sunydutchess.edu)**

Name: \_\_\_\_\_ DCC ID# \_\_\_\_\_

Because there is conflicting/insufficient information in your financial aid file, we must ask you to complete the following, sign and date, and return it to:

Office of Financial Aid  
 Dutchess Community College  
 53 Pendell Road  
 Poughkeepsie, NY 12601

We then can proceed to award your Aid/Loan. Please READ CAREFULLY!

**Student / Parent Information:**

**Household Size:**

If you are a **dependent student**, indicate below the number of people that your parents will support between July 1, 2011 and June 30, 2012. Include your parent(s) and yourself. Include your parent(s)' other children if they get more than half their support from your parent(s), or if they would be required to provide parental information when applying for federal student aid in 2011 – 2012. Include other people **only** if they **now** live with **and** get more than half their support from your parents and will continue to get this support between July 1, 2011 and June 30, 2012.

If you are an **independent** (self-supporting) student under student aid regulations, indicate below the number of people that you (and your spouse if married) will support between July 1, 2011 and June 30, 2012. Always include yourself (and spouse if married). Include your children if they get more than half their support from you. Include any other people **only** if they **now** live with **and** get more than half their support from you and will continue to get this support between July 1, 2011 and June 30, 2012.

Full Name	Age	Relationship	Name of College 2011-2012
		SELF	

Signature: \_\_\_\_\_ Date: \_\_\_\_\_