

**A. Dependent Student's Information**

<b>Name:</b>	<b>SSN #:</b>
<b>Address:</b>	
<b>Date of Birth:</b>	<b>Phone Number:</b>

**B. Dependent Student's Family Information**

List below the people in your household. Include:

- Yourself
- Your Spouse, if you are married.
- Your children, if any, if you will provided more than half their support from July 1, 2016, through June 30, 2017, or if the child would be required to provide your information if they were completing a FAFSA for 2016-2017. Include children who meet either of these standards, even if they do not live with you.
- Other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2017.

Include the name of the college for any household member who will be enrolled at least half time, in a degree, diploma, or certificate program at a postsecondary educational institution any time between July 1, 2016, and June 30, 2017.

Full Name	Age	Relationship	College	Will be enrolled at least halftime?
<i>Jean Smith (example)</i>	28	<i>Spouse</i>	<i>Central University</i>	<i>Yes</i>
		Self		

**C. High School Completion Status**

Provide one of the following documents that indicates the students high school completion status:

- A copy of the students high school diploma
- A copy of the students final official high school transcript that shows the date when the diploma was awarded
- A copy of the student's General Educational Development (GED) certificate or GED transcript
- An academic transcript that indicates the student successfully completed at least a two-year program that is acceptable for full credit toward a bachelor degree.
- If state law requires a homeschooled student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a copy of that credential.
- If state law requires a homeschooled student to obtain a secondary school completion credential for homeschool (other than a high school diploma or its recognized equivalent), a transcript or the equivalent, signed by the student's parent or guardian, that lists the secondary school courses the student has completed and documents the successful completion of a secondary school education in a homeschool setting.

**D. Student’s Other Information to be Verified**

Complete this section if someone in the student’s household (Listed in Section B) received benefits from the Supplemental Nutrition Assistance Program or SNAP (formerly known as food stamps) any time during the 2014 or 2015 calendar years. If asked by school, I will provide documentation of the receipt of SNAP for 2014 and/or 2015.

**E. Child Support Paid**

Either I, or if married my spouse who is listed in section B of this worksheet, paid child support in 2015. I have indicated below the name of the person who paid the child support, the name of the person to whom the support was paid, the names of the children for whom child support was paid, and the total annual amount of child support that was paid in 2015 for each child. If asked by my school, I will provide documentation of the payment of child support. *If more space is needed, attach a separate page with your name and Social Security Number at the top.*

Name of Person who paid child support	Name of person to whom child support was paid	Name of child for whom support was paid	Amount of child support paid in 2015
Marty Jones (EXAMPLE)	Chris Smith	Terry Jones	\$6,000.00

**F. Certification and Signature**

I certify that all of the information reported on this worksheet is complete and correct. The student and parent must sign this worksheet. **WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.**

\_\_\_\_\_  
Student’s Signature

\_\_\_\_\_  
Date

**Identity and Statement of Educational Purpose  
(To be signed at MACU)**

The student must appear in person at Mid-America Christian University to verify his or her identity by presenting a valid government issued photo identification (ID), such as, but not limited to, a driver’s license, other state issued ID, or passport. The institution will maintain a copy of the student’s photo ID that is annotated with the date it was received and the name of the official at the institution authorized to collect the student’s ID.

In addition, the student must sign, in the presence of the institutional official, the following:

**Statement of Educational Purpose**

I certify that I \_\_\_\_\_ am the individual signing this Statement of  
(Print Student’s Name)

Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Mid-America Christian University for 2016-2017.

\_\_\_\_\_  
Student’s Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student I.D. #

**Official Use Only:**

[ ] Check here if the student appeared in person and presented one of the following photo documents.

- \_\_\_\_\_ Driver’s License
- \_\_\_\_\_ Passport
- \_\_\_\_\_ State Issued I.D.

\_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_  
School Official’s Name

\_\_\_\_\_  
Date Accepted

**If you are not able to appear at MACU in person, please see the instructions on the following page and submit it along with the rest of this document.**

**Identity and Statement of Educational Purpose  
(To Be Signed With Notary)**

If the student is unable to appear in person at Mid-America Christian University to verify his or her identity, the student must provide:

- (a) A copy of the valid government-issued photo identification (ID) that is acknowledged in the notary statement below, such as but not limited to a driver’s license, other state-issued ID, or passport; and
- (b) The original notarized Statement of Educational Purpose provided below.

**Statement of Educational Purpose**

I certify that I \_\_\_\_\_ am the individual signing this Statement of Educational Purpose and that the federal student financial assistance I may receive will only be used for educational purposes and to pay the cost of attending Mid-America Christian University for 2016-2017.

\_\_\_\_\_  
(Student’s Signature) (Date)

\_\_\_\_\_  
(Student’s ID Number)

**Notary’s Certificate of Acknowledgement**

State of \_\_\_\_\_

City/County of \_\_\_\_\_

On \_\_\_\_\_, before me, \_\_\_\_\_,  
(Date) (Notary’s name)

personally appeared, \_\_\_\_\_, and provided to me  
(Printed name of signer)

on basis of satisfactory evidence of identification \_\_\_\_\_  
(Type of government-issued photo ID provided)

to be the above-named person who signed the foregoing instrument.

**WITNESS my hand and official seal**  
(seal)

\_\_\_\_\_  
(Notary signature)

My commission expires on \_\_\_\_\_  
(Date)

**Return to: Mid-America Christian University  
Student Financial Services  
3500 SW 119<sup>th</sup> Street, Oklahoma City, Oklahoma 73170  
Fax: (405) 692-3279  
Email: [financialaid@macu.edu](mailto:financialaid@macu.edu)**