



INDIANA UNIVERSITY FORT WAYNE

OFFICE OF STUDENT FINANCIAL SERVICES

2023-2024 Household Support Worksheet

Section 1: Student Information

Name: _____ University ID#: _____

Section 2: Dependent Information

List any dependents who will receive more than half of their support from either the student (if independent) or student's parents (if dependent) between July 1, 2023 and June 30, 2024. Dependents listed must live in the household with the exception of dependent children attending college at least half-time.

Name	Relationship to student	Age

Section 3: Financial Information

Complete this section for the dependent(s) listed in section 2. Do not leave an item blank, if an item does not apply to you; enter "0" or "N/A".

Expense	Monthly Amount	Who pays this expense?	What amount of the expense does the student pay?	What amount of the expense does the parent pay?
Housing				
Food				
Clothing				
Medical Expenses				
Insurances				

Section 4: Certification

By signing this worksheet, we certify that all the information reported is complete and accurate. Electronic signatures are not acceptable. Completed forms can be uploaded to www.go.iu.edu/fasecure.

Student Signature: _____ Date: _____
 To sign this form, print it then provide your signature and date.

Parent Signature (for dependent students): _____ Date: _____