

P.O. Box 400204, Carruthers Hall Charlottesville, VA 22904-4204 Telephone: (434) 982-6000

Website: <a href="http://sfs.virginia.edu">http://sfs.virginia.edu</a>

#### **DOSD**

# Document of Support for Student's Dependent Form 2022-2023

### Purpose of Form

Generally, the Document of Support for Student's Dependent Form is requested to confirm an INDEPENDENT student's household size.

Typically, students who include the following individuals will be asked to complete and submit this form. Please note that this list is not all-inclusive and the individuals are listed in relation to the student.

- 1. Parents or grandparents
- 2. Siblings in graduate or professional school
- 3. Siblings born before January 1, 1999
- 4. Student's spouse or significant other
- 5. Student's dependent(s) including children if the student is independent for financial aid purposes
- 6. Other persons such as cousins, nieces/nephews, friends of the family

Please review the individuals listed on your CSS PROFILE or, if applicable, the Household Size form to determine the individual(s) in question. You will need to submit this form for EACH individual you list as your dependent.

#### **General Instructions**

In order to include a dependent in your household, you must provide more than 50% of his/her support from July 1, 2022 to June 30, 2023. Support includes money paid directly to the individual, money paid on his/her behalf, living space and/or food provided free of charge for the individual reported.

### SECTION 1: ANNUAL INCOME AND SUPPORT FROM JULY 1, 2022 TO JUNE 30, 2023

In this section, you should report the amount of income and support received by the individual. When reporting income and support, be sure to report all sources, domestic and foreign.

### SECTION 2: ANNUAL EXPENSES FROM JULY 1, 2022 TO JUNE 30, 2023

In this section, you should report the cost or cash value of each expense. Cash value is defined as the amount that a third party would pay to receive the same benefit. For instance, if the individual is living in your home free of charge, the amount that a third party would pay to live in the space is the cash value of the housing benefit.

#### **EXAMPLE 1:**

## What is the annual housing cost for the dependent from July 1, 2022 to June 30, 2023?

Annual Cost	Total annual cost or cash value	Portion of total provided by dependent	Portion of total provided by you, the student	Portion of total provided by UVA student's parent(s)	Portion of total provided by financial aid/veteran's benefits	Portion of total provided by other: (indicate source)
Housing	\$4200	\$3000	\$1200	\$0	\$0	\$0

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### **General Instructions (Continued)**

If the individual's expenses are not covered by him/herself, by you, or by financial aid/veteran's benefits, list the cost in the column "Portion of total provided by other." Please define "other" on the line in the column heading.

Note that the amount you report as the "Total cost or cash value" of each expense (in the first column with a dollar sign) must equal the combined sum of the "provided by" amounts listed in the four following columns.

#### **EXAMPLE 2:**

### What are the annual child care costs for the dependent from July 1, 2022 to June 30, 2023?

Annual Cost	Total annual cost or cash value	Portion of total provided by dependent	Portion of total provided by you, the student	Portion of total provided by UVA student's parent(s)	Portion of total provided by financial aid/veteran's benefits	Portion of total provided by other: (indicate source) Noncustodial parent
Child Care Costs	\$7800	\$0	\$4200	\$0	\$0	\$3600

Student Financial Services may request third-party documentation to confirm the values you report on your Document of Support for Student's Dependent Form. Should you submit a form with incorrect information, you must also submit third-party documentation to confirm the correct values. Adjustments to a financial aid award as a result of submitting documentation to correct a Document of Support for Student's Dependent Form are neither guaranteed nor immediate.

Forms received without the appropriate signature(s) or with missing information or missing pages are considered incomplete and must be resubmitted. This will delay the evaluation of your financial aid eligibility and the awarding of your financial aid.

IMPORTANT: ALL SECTIONS OF THIS FORM MUST BE COMPLETE BEFORE SUBMISSION.
INCOMPLETE FORMS WILL DELAY THE EVALUATION AND AWARDING OF YOUR FINANCIAL AID.

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Student's University ID:	<b>-</b>	SIS ID:	
LEGAL NAME - PRINT) first	middle		last
SECTION 1: ANNUAL INCOME AND SUP	PORT from July 1, 2022 to J	lune 30, 2023	
Name of dependent			
Relationship of dependent to student			
Will the dependent be living in the far months between July 1, 2	-	☐ Yes	□ No
Is the d	ependent above employed?	☐ Yes	□ No
Will the depender between July	☐ Yes	□ No	
SOURCE OF ANNUAL INCOM (enter "0" or "	AMOUNT OF ANNUAL INCOME AND SUPPORT (Please leave no blanks)		
	\$		
Depen	\$		
	\$		
Dependent's	\$		
Depend	\$		
	\$		
Other	paid on their behalf family, friends, etc.)		
Please indicate the source(s):			\$

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Add all income lines to get the Dependent's TOTAL ANNUAL INCOME



Add values in each column to

calculate total annual expenses.

\$

# **Student Financial Services**

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Student's Universit	y ID:			or SIS ID:			
SECTION 2: ANNUAL EXPENSES from July 1, 2022 to June 30, 2023							
	COLUMN 2A	COLUMN 2B	COLUMN 2C	COLUMN 2D	COLUMN 2E	COLUMN 2F	
Annual Expense (enter "0" or "N/A", if appropriate)	Total annual expense or cash value (Leave no blanks)	Portion of total provided by dependent	Portion of total provided by you, the student	Portion of total provided by UVA student's parent(s)	Portion of total provided by dependent's financial aid/veteran's benefits	Portion of total provided by other: (indicate source)	
Utilities	\$	\$	\$	\$	\$	\$	
Transportation	\$	\$	\$	\$	\$	\$	
Insurance	\$	\$	\$	\$	\$	\$	
Personal Expenses	\$	\$	\$	\$	\$	\$	
Child Care Expenses	\$	\$	\$	\$	\$	\$	
Annual Expense	Annual Expense Please note that you may be asked to submit documentation of the dependent's housing expense.						
Housing	\$	\$	\$	\$	\$	\$	
Annual Expense	Please note that you may be asked to submit documentation of the dependent's food expenses.						
Food Expense	\$	\$	\$	\$	\$	\$	
Annual Expense	You must submit a copy of the dependent's tuition bill for 2022-2023.						
Education Expenses	\$	\$	\$	\$	\$	\$	
Annual Expenses	COLUMN 2A TOTAL	COLUMN 2B TOTAL	COLUMN 2C TOTAL	COLUMN 2D TOTAL	COLUMN 2E TOTAL	COLUMN 2F TOTAL	

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DOSD Document of Support for Student's Dependent Form 2022-2023							
Student's University ID:							
	Will the dependent attend college in	2022-2023?	☐ Yes	□ No	1		
If you answer	Will/Did this dependent apply for or receive financial aid, fellowships, assistantships, or scholarships for 2022-2023?  If you answer yes, you must submit a copy of the financial aid letter/scholarship notice for 2022-2023 or your application will be on hold until it is submitted.						
SECTION 3: SUMMARY							
	Dependent's TOTAL ANNUAL INCOME from Section 1	\$					
	Total annual support provided by you, the student	\$					
You may use this space to add any comments. Attach any additional relevant third-party documentation.							
<b>CERTIFICATION STATEMENT:</b> I certify that all the information reported to qualify for federal aid is complete and correct to my knowledge. If additional documentation is required, I will submit those documents in a timely manner. I understand that if I purposely give false or misleading information, I may face legal consequences and my financial aid may be terminated.							
STUDENT SIGNATURE Dat			e				

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