



FINANCIAL AID OFFICE
366 Luna Drive • Las Vegas, NM 87701
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 FAX: (505) 454-2539 • EMAIL: finaid@luna.edu

2017-2018 Legal Dependent Certification

Please read the entire form, complete ALL sections, and return to the Financial Aid Office. By law, Luna Community College has the right to request this information before awarding financial aid. *Incomplete worksheets and documentation will cause delays in processing your financial aid. No determination of aid eligibility can be made until all documents are received and reviewed.* **Warning: If you purposely give false or misleading information on this form, you may be fined, be sentenced to jail, or both.**

STUDENT'S NAME: _____
(Print)

SSN or LCC ID: _____

I certify, by my signature below, that I have **legal dependents** and they receive at least **51%** of their support from me. Furthermore, I certify that they will continue to get this support during the 2017-2018 school year. My dependents are listed below:

Name	Age	Relationship
<i>Suzy Doe</i>	2	<i>Daughter (example)</i>

 Student Signature

/ /

 Date

 Parent Signature (*Required for dependent students **ONLY***)

/ /

 Date