2026-2027 VERIFICATION OF RESOURCES
Dependent Student

Student's Name: _____ Furman ID Number (or SSN): _____

Parent's Name(s): _____

Parent's Marital Status (as of today): ☐ Never Married ☐ Married/Remarried ☐ Divorced/Separated ☐ Unmarried and both legal parents living together ☐ Widowed

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Insufficient resources have been reported for basic living expenses. Please, list monthly 2024 income and the expenses paid from this income.

NOTE: If you are a dependent student (as defined by the FAFSA), parental information must be reported below.

INCOME/RESOURCES	2024 MONTHLY INCOME/RESOURCES
Income from work – W2/1099 received	$ /month
Income from work – Not reported on a W2	$ /month
Unemployment	$ /month
Military allowances	$ /month
Pension	$ /month
Child support/alimony	$ /month
Social Security benefits	$ /month
Food stamps	$ /month
Subsidized housing	$ /month
ADC (including child care)	$ /month
Rental income from properties	$ /month
Unsecured loan(s)	$ /month
2024 TOTAL MONTHLY INCOME/RESOURCES	**$ /month**

EXPENSES	2024 MONTHLY EXPENSES
Mortgage/Rent (provide receipt)	$ /month
Utilities (phone, electric, heating, water, cable, etc) (provide statements)	$ /month
Food	$ /month
Automobile (loan/lease, fuel, repairs, insurance, etc) (provide statements)	$ /month
Medical/Dental	$ /month
Miscellaneous (child care, etc) (provide receipts)	$ /month
2024 TOTAL MONTHLY EXPENSES	**$ /month**

Attach a ***signed*** and ***dated*** copy of you and your parent's 2024 federal tax return (if applicable). Include all schedules and W2(s). If you have additional comments about your living expenses or income resources, please attach another sheet.

_____ _____

Student Signature *(Required)* Date Parent Signature *(Required)* Date

Please return the fully completed and signed form to:
Furman University • Enrollment Services • 3300 Poinsett Highway • Greenville, SC 29613 • 864.294.2351 • financialaid@furman.edu