



2024-2025 Statement of Support
(Form F24SUPP)

Return this form and related documents to the Wabash College Financial Aid Office
PO Box 352, Crawfordsville IN 47933
765-361-6166 (fax)

You indicated on the FAFSA that you:

- a) have or will have children who will receive more than half of their support from you between July 1, 2024 and June 30, 2025 and/or
b) have dependents (other than your children or spouse) who currently live with you and who receive more than half of their support from you, now and through June 30, 2025.

The income you reported seems unusually low to support others. Therefore, we must verify how you are able to live on the amount reported and evaluate all sources of income contributing to your overall financial support. Please provide supporting documentation (ex. current pay stubs, bank statements, etc.) to substantiate your income and resources used to support your child/ren and/or other dependents.

Student's Name

Wabash Student ID #

Section 1: Student's Annual Living Expenses (for the past 12 months)

Table with 3 columns: Expense Category, Frequency (per month X 12), and Amount (\$). Rows include Rent/Mortgage, Utilities, Food, Transportation, and three 'Other' categories, followed by a TOTAL ANNUAL EXPENSES row.

Section 2: Student's Annual Income & Resources (for the past 12 months)

Table with 2 columns: Income/Resource Category and Amount (\$). Rows include Income earned from work, Child support received, Welfare benefits, Supplemental Security Income (SSI), Social Security Benefits, Non-educational veteran's benefits, Disability income, Unemployment compensation, Gifts and/or cash support received, and three 'Other' categories, followed by a TOTAL ANNUAL RESOURCES row.

In **Section 3**, list all of your children and/or other dependents who you are supporting. Include detailed information about with whom your child/ren have lived since birth. Include months and years of each residence, up to the current date. Attach additional pages as necessary. For dependents other than your children or spouse, indicate the month and year they moved in with you (when you began paying **more than half** of their support).

Section 3: Children / Dependents			
Name	Age	Relationship	Residing With and Dates

Section 4: Statement
On a separate page, provide a general statement of how you have been able to support yourself and your child/ren or others. Explain how you will continue to provide for each child/dependent through June 30, 2025.

Certification

I certify that I am the student and that all information contained in this document concerning the financial support of my child/ren and/or others is true. I understand that reporting inaccurate or incomplete information may result in a charge-back of financial aid awarded on the basis of the inaccurate information.

Student's Signature

Date

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

NOTE: If you realize that you answered the dependency questions incorrectly on the FAFSA, please make corrections at <https://studentaid.gov>. You will need to include your parents' demographic and income information and resubmit your FAFSA. You do not need to return this form if you correct your FAFSA to reflect that you don't provide **more than half** of the financial support for your child/ren or others.