

**Tuition Waiver Program
Affidavit of Legal Dependent(s)**

State of Florida
County of Miami-Dade

I, _____, an employee of
(Employee's Name, Social Security/Panther ID Number)

Florida International University residing at:

_____ ,
Street Address City State Zip Code

Deposes and states, under penalty, that:

1. I am the legal _____ of:
(Relationship: Parent, Guardian, Foster Parent, etc.)

Dependent's Name	Dependent's Panther ID#	Age
_____	_____	_____
_____	_____	_____

Note: You must supply legal documentation of appointment as guardian or foster placement.

- 2. The above-listed dependent child/children currently qualify as my financial dependent(s) under IRS guidelines.
- 3. Said child/children reside with me at the above-listed address or in the home of the child's other legal parent.

_____ (Name of Other Parent) _____ (Full Address of Other Parent)

4. Said child/children are dependent upon me for at least one-half of their support.¹

5. Said child/children are unmarried and under the age of 25 years old.
6. I understand that I must continue to provide proof of dependency annually.
7. I understand that FIU reserves the right to audit information provided on this form, and request a copy of my completed federal tax return(s) when and if they become available.
8. If I change/revise my federal tax return, and no longer claim my child as a tax dependent, I will notify FIU and reimburse the full tuition cost, if applicable.

[Print name of affiant]

[Signature of affiant]

Subscribed and sworn to before me, this _____ *[day of month]* day of _____ *[month]*, 20____ by _____ (Name of affiant). Personally known _____ or Produced _____ identification.

[Notary Seal:]

[Signature of Notary Public]

[Name of Notary Public]

NOTARY PUBLIC

My commission expires: _____, 20____.

¹ **Support** for your children or dependent(s) includes housing, food, clothing, medical and dental care, childcare, money, gifts, etc. that you provide. **Resources** that enable you to provide the support can include: (1) Earnings you receive from work or in-kind support (housing/food in exchange for work). (2) Assistance you receive from other agencies (such as Medicaid, Temporary Assistance for Needy Families, and food stamps). Money you receive from your parent(s) cannot be included as a resource for your dependents' support.