

## 2019-2020 Dependent Care Expenses

### SECTION A: STUDENT INFORMATION

Name:	UNT Assigned ID:	SSN (last 4 digits only):
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### SECTION B: ANTICIPATED ATTENDANCE

Please indicate the term(s) you will be paying for pay dependent care expenses:

Fall 2019/Spring 2020    
  Fall 2019 Only    
  Spring 2020 Only    
  Summer 2020 Only

### SECTION C: DEPENDENT INFORMATION

Please list dependents age 12 and under for whom you, **the student**, will pay dependent care expenses accrued while attending classes for the 2019-2020 academic year. The dependents must have been included as part of your household on your 2019-2020 FAFSA.

Full Name of Dependent	Age of Dependent	Relation to Student	Documentation (Required)
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

### SECTION D: DOCUMENTATION-REQUIRED

- Submit copies of receipts or a tuition agreement from your daycare provider. Handwritten receipts will not be accepted. Documentation **must** be provided on daycare letterhead, and include the name of each dependent, their age, cost per dependent, and dates verifying current enrollment.
- If you have dependents age 12 or older that require special services, please provide a statement explaining required services. Please submit care plan on provider letterhead. Documentation **must** include the name of dependent, cost of care per dependent, and dates of care.

### SECTION D: CERTIFICATION

By signing this form, I certify that this form and all required documentation is complete and accurate. I also certify that the expenses reported are for dependent care expenses accrued while I am attending classes for the 2019-2020 academic year. I understand that a request may be denied or limited for any reason – even if a similar request has been approved in the past.

**Electronic signatures are not accepted.**

Student Signature

Date

  X   \_\_\_\_\_

**Return this completed form with any required documentation to:**

Student Financial Aid & Scholarships, University of North Texas - 1155 Union Circle #311370, Denton, TX 76203-5017  
 or fax to (940) 565-2738 or save and attach as PDF and email to [financialaid@unt.edu](mailto:financialaid@unt.edu)