

FOR OFFICE USE ONLY
Correction Date & #
Initials:
New SAI:

Student Financial Services – South Texas College

 Page 3201 W. Pecan Blvd. McAllen, TX 78501 | 4 956.872.8375 | 6 956.872.6461

2025-2026 Support Worksheet

	2025-2020 Support	Workshiell	
To qualify: ✓ They must live with you	a dependent (not your child or spouse) (or your parent, if dependent). than half of their support from you (Ju		6).
	Than than of their support from you (or		
nstructions: nclude your name and STC I	D on all statements. Do NOT use white-o	out.	
Student Information			
STC ID:	SSN: XXX-XX-		
Last Name:	First Name:	MI:	DOB:
Phone:	Email:	@stu.south	texascollege.edu
 Person Being Suppo Age: Relationship: Does this person live How long have they lead to the owns/pays rent Who pays for utilities 	ived with you? for the home? 6?	Attach 2023 Tax Return)No	
	ne: \$nses? If Yes, attach receipts. Yes (Social Security, TANF, SNAP, etc.)?	No Yes No	

Estimated Monthl	y Expenses for Depen	dent			
Expense		Amou	nt Paid		
Food/Clothing		\$	it i did		
Medical/Dental		\$			
Personal Care		\$			
Education Expenses		\$			
Other (Specify)		\$			
•	xplain why this person lives	•	explain where their parents	live and why the child is	
Tuition deadlines still app	Financial Aid \rightarrow Select Award Y lley, or Starr Co. Financial Servi	its while waiting ∕ear → Check Notification	s		
We can only accept e	d HAND WRITTEN SIGNA lectronic signatures/typed s nticates your identity.		ploading your documents v	via your STC JagNet	
	rify that all information provide rposely provide false or misle	•		both.	
	tudent Signature: Date:				
Student Signature:			Date:		
Student Signature: Parent Signature (if			Date: Date:		
•	dependent):		Date:		
Parent Signature (if	dependent):	ICIAL SERVICES DE			
Parent Signature (if Approved:	dependent):		Date:PARTMENT USE ONLY	Date:	

Revised 4-23-25 SFS

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