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**2021-2022 THIRD PARTY CERTIFICATION**

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**Complete form in blue or black ink**

**To the student:** Please give this form to someone who knows your situation well, such as clergy, social worker, or other social services personnel, court official, teacher, counselor, or police officer. After completion, attach this form to your **Change of Dependency Request** form through the Mt. SAC Financial Aid Office DocuSign System.

**STEP 1: STUDENT'S INFORMATION**

Student's Last Name	Student's First Name	Student's M.I.	Student's Mt. SAC ID Number	Date of Birth
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**STEP 2: DESCRIBE STUDENT'S HOME SITUATION AND RELATIONSHIP WITH PARENTS**

Please describe the above student's home situation and relationship with his/her parents in enough detail for the Financial Aid Office at Mt. San Antonio College to determine if there is an adverse home situation.

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(Attach additional sheets if needed)

**STEP 3: CERTIFICATION AND SIGNATURE**

I certify that the above statement is true and correct to the best of my knowledge.

Third Party's Signature	Date
Third Party's Printed Name	Telephone Number
Address	City, State, and Zip Code
Relation to Student	How long have you known the student?