

## Spouse and Dependent Verification Form

## Please complete the following:

| Name of City Employee: |                            |
|------------------------|----------------------------|
| Address 1:             |                            |
| Address 2:             |                            |
| City:                  | State: Zip Code:           |
| Phone:                 | City of Phila. Payroll No. |
| Name of Student:       |                            |
| Address 1:             |                            |
| Address 2:             |                            |
| City:                  | State: Zip Code:           |
| Phone:                 | Relationship to Employee:  |

The following documentation is needed in order for the discount to be applied to student's account.

## **Spouse Provide a copy of (choose one)**

- Most recent year's 1040 Married Filing Jointly federal tax return that lists the spouse (black out financial information and dependents' Social Security numbers)
- Subscriber's and spouse's most recent 1040 Married Filing Separately federal tax return (black out financial information and dependents' Social Security numbers)
- Proof of common residence (example: a utility bill) and marriage certificate
- Proof of financial interdependency (example: a shared bank statement—black out financial information) and marriage certificate\*
- Medical card listing City Employee

## **Dependent - Provide a copy of (choose one)**

- Most recent year's federal tax return that includes the child(ren) as a dependent and listed as a son or daughter (black out financial information and dependents' Social Security numbers)
- Birth certificate (or hospital certificate with the child's footprints on it) showing the name of the parent who is the City Employee.
- Certificate or decree of adoption
- Court-ordered parenting plan
- Medical card

Please return documentation to:

School of Graduate Studies – SGS Staff, SJ 378, 215.248.7170, gradschool@chc.edu