WESTERN TEXAS COLLEGE

REQUEST FOR DEPENDENCY STATUS CHANGE

Reference Form (1 of 3)

Award Year 2026-2027

Applicant's Name: _____
Last First MI

Please answer the following questions: (Please Print Clearly)

1. How long have you known the applicant? _____
2. Are you related to the applicant? □ Yes □ No If so, how? _____
3. With whom does the applicant reside? _____
4. To your knowledge, has anyone, other than the applicant, claimed them as an income tax exemption for the following years?

   2024? □ Yes □ No If yes, who? _____
   2025? □ Yes □ No If yes, who? _____

5. Please provide as much information as possible in regards to the applicant's situation. If you should need more space to explain, please attach a letter or use the back of this form.

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Name of Reference (Please Print): _____Telephone: _____
Official Title/Relationship to Applicant: _____
Mailing Address: _____
Street, Apt. #, PO Box City State Zip Code
Best time to be reached: _____

All of the information on this form is true and complete to the best of my knowledge. I also understand that I may be contacted if further information is needed.

Signature: _____ Date: _____

Western Texas College does not discriminate on the basis of race, color, national origin, sex, disability or age in its programs, activities or employment policies.
Rev. 4/15/2026

WESTERN TEXAS COLLEGE

REQUEST FOR DEPENDENCY STATUS CHANGE

Reference Form (2 of 3)

Award Year 2026-2027

Applicant's Name: _____
Last First MI

Please answer the following questions: (Please Print Clearly)

1. How long have you known the applicant? _____
2. Are you related to the applicant? □ Yes □ No If so, how? _____
3. With whom does the applicant reside? _____
4. To your knowledge, has anyone, other than the applicant, claimed them as an income tax exemption for the following years?

   2024? □ Yes □ No If yes, who? _____
   2025? □ Yes □ No If yes, who? _____

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Name of Reference (Please Print): _____Telephone: _____
Official Title/Relationship to Applicant: _____
Mailing Address: _____
Street, Apt. #, PO Box City State Zip Code
Best time to be reached: _____

All of the information on this form is true and complete to the best of my knowledge. I also understand that I may be contacted if further information is needed.

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Rev. 4/15/2026

WESTERN TEXAS COLLEGE

REQUEST FOR DEPENDENCY STATUS CHANGE

Reference Form (3 of 3)

Award Year 2026-2027

Applicant's Name: _____
Last First MI

Please answer the following questions: (Please Print Clearly)

1. How long have you known the applicant? _____
2. Are you related to the applicant? □ Yes □ No If so, how? _____
3. With whom does the applicant reside? _____
4. To your knowledge, has anyone, other than the applicant, claimed them as an income tax exemption for the following years?

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