

## Declaration of Dependency Form (Child Dependency)

**Instructions:** Please complete all sections of this declaration form. Attach supporting documents (e.g., birth certificate, guardianship order) as required. Incomplete forms may result in processing delays.

Parent/Guardian Name:	<input type="text"/>
Address:	<input type="text"/>
Child's Full Name:	<input type="text"/>
Child's Date of Birth:	<input type="text"/>
Relationship to Child:	<div><div>-- Select --</div><div>If other, please specify</div></div>
Reason for Dependency:	<div>Explain why the child is considered dependent.</div>
Supporting Documents Attached:	<div><div><input type="checkbox"/> Birth Certificate</div><div><input type="checkbox"/> Guardianship Order</div><div><input type="checkbox"/> Other (specify below)</div><div>Other document(s)...</div></div>

I hereby declare that the information provided above is accurate and complete to the best of my knowledge. I understand that providing false or misleading information may result in penalties or loss of benefits.

Signature:	<input type="text"/>
Date:	<input type="text"/>

**Note:** The **declaration of dependency form sample** for child dependency is a crucial document used to verify the dependent status of a child for various legal and financial purposes. This form ensures that the child's dependency is officially recognized, facilitating access to benefits, tax credits, or support services. Proper completion of the form helps streamline the validation process and avoids potential disputes.