

2019-2020 Confirmation of Orphan, Ward of the Court or Foster Care Status

_____ / _____ / _____
Student's Name **Last Four of Social Security #** **Student ID**

You indicated on your 2019-2020 FAFSA that at some time since you turned age 13, you were either an orphan, a ward of the court, or were in foster care. Before we can continue processing your Financial Aid you must complete this form and return it to our office by fax or mail as provided in the upper right corner of this form.

Step 1: Please provide your date of birth: _____ / _____ / _____
 (Month) (Day) (Year)

Step 2: Please check the appropriate box below. Provide any requested information and your signature.

<input type="checkbox"/>	<p>Check this box if at any time since you turned age 13 you had no living biological or adoptive parents (even if you are now adopted).</p> <p>Provide the following dates:</p> <p style="text-align: center;">Date of father's death: _____</p> <p style="text-align: center;">Date of mother's death: _____</p>
<input type="checkbox"/>	<p>Check this box if at any time since you turned age 13 you were in foster care, even if you are no longer in foster care today.</p> <p>Provide the following information about your foster parent(s):</p> <p style="text-align: center;">Name of foster parent(s) _____</p> <p style="text-align: center;">Address of foster parent(s) _____</p>
<input type="checkbox"/>	<p>Check this box if at any time since you turned age 13 you were a ward of the court, even if you are no longer a ward of the court today.</p> <p>Please attach a copy of the court documents and return them with this form.</p>
<input type="checkbox"/>	<p>Check here if none of the situations above applies to you.</p>

By signing this document, I certify that all the information reported on it is complete and correct. If I purposely give false or misleading information on this document, it will be cause for denial or repayment of financial aid and I may also be fined, sentenced to jail, or both.

_____ / _____
Student Signature **Date**

Return this form and any attachments to the above address.