



**VERIFICATION OF ORPHAN
OR WARD OF THE COURT
STATUS**

**OW
2010-2011**

_____		_____	_____
Student Applicant's Last Name		First Name	M.I.
_____	_____		
Social Security Number	Birthdate		
_____		_____	_____
E-mail Address		Telephone #	Cell Phone #

According to our records, you indicated on the Free Application for Federal Student Aid (FAFSA) that either your parents are deceased, or you are (or were until age 18) a ward/dependent of the court. This information must be verified before the processing of your federal financial aid application can be completed. Please complete this form and return it with all required documentation to the address listed below.

- 1) At any time since you turned age 13, were both your parents deceased? Yes No
 * If the answer is yes, you must submit copies of each of your parent's death certificates
 * If the answer is no, you must provide parent information on the FAFSA. You may make this correction on-line at www.fafsa.gov.

---OR---

- 2) At any time since your turned age 13, were in foster care or were you a ward of the court? Yes No
 * If you answered yes, you must submit copies of court or legal documents verifying your status
 * If you were emancipated, incarcerated, have a guardian not appointed by the court, or your parents are divorced, you must answer no. You must also provide parent information on the FAFSA. You may make this correction on-line at www.fafsa.gov.

- 3) Do you have an adopted parent? Yes Age at time of adoption: _____ No
 * If you answered yes, you must submit copies of court or legal documents verifying the date & the age at the time of adoption.

Certification Statement:

I certify that all of the information above, used to determine eligibility for federal financial aid, is true and correct to the best of my knowledge. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment, or both, under provisions of the United States Criminal Code.

_____	_____
Student Name (Print clearly)	Date

Student Signature	