



Student Name: _____ FRC ID: _____

On your 2017-2018 Free Application for Federal Student Aid (FAFSA), you indicated that both of your parents are deceased, you were in foster care, or you are/were a dependent or ward of the court. *Please complete this form by checking one of the boxes below, sign and submit it, along with any required documentation, to the Financial Aid Office. Include your student ID number on all documentation submitted. **We encourage you to make a copy of this form and all documents for your records.***

I am an orphan. Check this box only if you had no living parent (biological or adoptive) at any time since you turned age 13, even if you are now adopted.

Documentation: Attach a copy of the death certificate for each of your parents.

I was in foster care. Check this box only if you were in foster care at any time since you turned age 13, even if you are no longer in foster care as of today.

Documentation: Attach a copy of a court’s decision or other documentation to verify your status.

I am a ward of the court. Check this box if you were a dependent or ward of the court at any time since you turned age 13, even if you are no longer a dependent or ward of the court as of today. For federal student aid purposes, someone who is incarcerated is not considered a ward of the court.

Documentation: Attach a copy of a court’s decision or other documentation to verify your status.

I made an error on my FAFSA and I have never been an orphan nor a ward of the court, and neither am I/was I in foster care.*

*You must provide your parent(s) information and signature on your FAFSA at www.fafsa.gov.

I certify that all information reported on this form is true, complete, and accurate. I understand that any false statements or misrepresentation will be cause for denial, reduction, withdrawals and/or repayment of financial aid.

Student Signature: _____ Date: _____

**THIS WORKSHEET MUST BE SIGNED AND DATED TO BE VALID.
ELECTRONIC AND/OR DIGITAL SIGNATURES ARE NOT VALID**

***** FOR OFFICE USE ONLY *****

- Qualifying:
 - Orphan
 - Foster Care
 - Ward of the Court
- Not eligible

Processed by _____ Date _____

Notes: _____