

Financial Aid

201 E. Greene Street | Milledgeville, Georgia 31061 (800) 342-0413 | (478) 387-4842 | (478) 445-1257 Fax

STUDENT DEPENDENCY STATUS WORKSHEET 2014-2015

	Student Printed Name	Student ID#	Student E-mail	
	ndicated on the FAFSA that you met one and submit court documentation to veri	fy the choice selected.		riate
	deceased, I was in foster care, or I was a c	lependent or ward of the court.	e I turned age 13, both of my parents were	
	 □ Emancipated Minor – By checking emancipated minor up until I reached the □ Legal Guardianship - By checking to guardianship up until I reached the age of 	age of adulthood in the state which is box, I certify that I am curren	nere the court's decision was made. tly in legal guardianship, or I was in legal	
		OR		
the ap	meet any one of these stipulations pert propriate school personnel or homeles nation below.			<u>;</u>
			t homeless liaison determine that you were	an
	• At any time on or after July 1, 2013, did the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied youth who was homeless?			
			eless youth basic center or transitional living eless or were self-supporting and at risk of	g
Un	accompanied Youth who was Homeless is o			
1.	lacking fixed, regular and adequate housing other people because you had nowhere el		rs, motels or cars, or temporarily living with	
2.	you are not living in the physical custody of your parent or guardian, <u>and</u>			
3.	you are 21 years of age or younger or you are still enrolled in high school as of the day you completed the FAFSA.			
I hereb homele	y verify that the above-named student mee ess.	ets at least one of the listed crite	ria for an unaccompanied youth who was	
	Printed Name	School or A	Agency	
	Address	City, State,	Zip	
	Email Address	Phone Nur	nber	
	Authorized Signature	Official Titl	e	
 Stude	nt Signature		 Date	