

Financial Aid

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

STUDENT DEPENDENCY STATUS WORKSHEET 2013-2014

Student Printed Name	Student ID# Student E-mail	
You indicated on the FAFSA that you met one box, and submit court documentation to verif	of the criteria below. Please review each option, check the appro	priate
	ox, I certify that at any time since I turned age 13, both of my parents wer	·e
deceased, I was in foster care, or I was a d		
	this box, I certify that I am currently an emancipated minor, or I was an	
emancipated minor up until I reached the	age of adulthood in the state where the court's decision was made.	
	his box, I certify that I am currently in legal guardianship, or I was in legal	
guardianship up until I reached the age of	adulthood in the state where the court's decision was made.	
	OR	
If you meet any one of these stipulations pert	aining to an <u>Unaccompanied Youth who was Homeless</u> , please ha	ve
the appropriate school personnel or homeless	s shelter director verify your living status by completing the	
information below.		
 At any time on or after July 1, 2012, did y unaccompanied youth who was homeless? 	your high school or school district homeless liaison determine that you we	re an
	he director of an emergency shelter or transitional housing program fund	
	n Development determine that you were an unaccompanied youth who w	as
homeless?		
	he director of a runaway or homeless youth basic center or transitional liv	_
being homeless?	companied youth who was homeless or were self-supporting and at risk of)1
Unaccompanied Youth who was Homeless is d	lefined for financial aid nurnoses as:	
	g, which includes living in shelters, motels or cars, or temporarily living wi	th
other people because you had nowhere els		
you are not living in the physical custody of		
3. you are 21 years of age or younger or you a	are still enrolled in high school as of the day you completed the FAFSA.	
I hereby verify that the above-named student meet homeless.	ts at least one of the listed criteria for an unaccompanied youth who wa	S
Printed Name	School or Agency	
Address	City, State, Zip	
Email Address	Phone Number	
Authorized Signature	Official Title	
Student Signature		