

# Verification of Independent Status Form

When completing the FAFSA (Free Application for Federal Student Aid) you indicated one or more circumstances that may consider you an independent student for financial aid purposes. To confirm your independent status please complete the following information.

STUDENT NAME (PRINTED) \_\_\_\_\_ STUDENT ID \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ DAYTIME PHONE \_\_\_\_\_

**Mark the independent status you reported on the FAFSA and attach the required documentation**

If you do not meet the criteria listed, you must correct the dependency question on your FAFSA and provide the parent information and signature.

✓	Independent Status Criteria	Supporting Documentation Required
	Both of my parents are deceased	Attach a copy of your parents' death certificates
	I am currently or was a ward or dependent of the court or was in foster care since the age of 13.	Attach a copy of the court documentation regarding your ward/dependent of the court status.
	I am currently or was an emancipated minor as determined by a court in my state of legal residence	Attach a copy of the court documentation explaining that you are an emancipated minor as determined by a court in your state of legal residence.
	I am or was in legal guardianship as determined in my state of legal residence	Attach a copy of the court documentation explaining your legal guardianship as determined by a court in your state of legal residence.
	After July 1, 2017, I was homeless or at risk of being homeless	Attach a letter on official letterhead from a high school district homeless liaison, the director of a U.S. Department of Housing and Urban Development funded homeless shelter, or the director of a runaway or homeless youth basic center or transitional living program confirming your status.
	I answered the FAFSA incorrectly and <u>none of these circumstances apply.</u>	Correct the FAFSA by changing the answer the dependency question and include the parent(s) information and signature.*
	DCCC has previously documented my independent circumstances and they remain unchanged.	Provide an email response to the Financial Aid Office at <a href="mailto:finaid@davidsonccc.edu">finaid@davidsonccc.edu</a>

\* If you feel there are special circumstances which are not covered by these statements you may consider completing a "Request for Dependency Override" along with supporting documentation.

If you are the parent or the student, by signing this worksheet you certify that all information you provided is true and complete to the best of your knowledge and you agree, if asked, to provide information that will verify the accuracy of your completed worksheet. If you purposely give false or misleading information, you may be fined up to \$20,000, sent to prison, or both.

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Davidson Campus  
297 DCCC Road  
Thomasville, NC 27360  
336.249.8186 (Office)  
336.224.0240 (Fax)

Mailing Address  
P.O. Box 1287  
Lexington, NC 27293

Davie Campus  
1205 Salisbury Road  
Mocksville, NC 27028  
(Office) 336.751.2885  
(Fax) 336.751.6192