

## Financial Aid Offices

Lancaster, Salkehatchie, Sumter, Union

## 2023-24 CONFIRMATION OF ORPHAN, WARD OF THE COURT, OR FOSTER CARE STATUS

Student's Name:	VIP ID:
· · · · · · · · · · · · · · · · · · ·	eral Student Aid (FAFSA) that you are independent and will not provide in, ward of the court, or were in foster care at any time since you were 13. To confirm your status.
At any time since you turned age 13, were both ward of the court?	your parents deceased, were you in foster care or were you a dependent or
This statement is true. (Please complete return it to the Financial Aid Office.	e and sign this form, attach the requested supporting documentation, and
This statement is not true. (Please corre	ect your FAFSA or speak a counselor at your Financial Aid Office.)
f you indicated that you are an orphan, a ward answer the following questions:	of the court, or that you were in foster care any time since you turned 13,
1. Provide your date of birth:	/ (month / day / four-digit year)
2. Check the appropriate box below and p	provide the requested documentation:
Since I turned age 13, I have no	living parent, even if I am now adopted. Please provide the following dates:
Date of parent 1's death	h:
Date of parent 2's death	h:
Since I turned age 13, I have been the following:	en in foster care, even if I am no longer in foster care today. Please provide
Name of your foster pa	rent(s):
Address of your foster p	parent(s):
ward of the court today. (For fe	en a dependent or ward of the court, even if I am no longer a dependent or deral student aid purposes, someone who is incarcerated is not considered a ch a copy of the court documents.
	formation reported on it is complete and correct. If I purposely give false or lee be cause for denial or repayment of financial aid and I may also be fined,
Student's Signature:	Date: