



2016-2017 VERIFICATION OF DEPENDENCY STATUS

The Financial Aid Office has determined that you answered YES to one or more of the following questions on your Free Application for Federal Student Aid (FAFSA) application. Your status as an Independent student has been based solely on your response to these questions and University of the District of Columbia (UDC) requires that you verify your status and provide supporting documentation where applicable.

If you answer NO to the dependency questions below, you must make corrections to your FAFSA and, if required, provide your parent's information and signature on your FAFSA. For more information regarding each of these statuses, please refer to the 2016-2017 FAFSA application online at www.fafsa.gov.

- I do not meet the criteria listed below. I made an error on the FAFSA application. I am aware that if this is the only factor making me independent, I must have my parent complete the parent section of the FAFSA and sign the FAFSA in order for my application to be processed.

STUDENT INFORMATION (Please Print)

Student's Last Name	First Name	M.I.	N00- UDC Student ID#
Student's Email Address			Daytime Phone Number

CHILDREN WHOM YOU SUPPORT

You reported on your FAFSA that you now have or will have children for whom, you provide more than half of their support* between July 1, 2016 through June 30, 2017.

- **Provide a copy of each child's birth certificate.** If you reported an unborn child in your household size, please provide verification of the due date on doctor's letterhead.

If yes, please complete the following:

Name	Age	Relationship

Please provide the below information about any additional financial resources received by the student and any members of the student's household. *Note: If you respond no to all of the financial support items below, you must provide a statement in the comment section.*

Source of Financial Support	Please Circle One	<u>Total Amount</u> of Support Received in 2015
Income From Work	Y or N	Attach Your 2015 Tax Transcript and W2 Form (s) www.irs.gov/transcript <i>*Make sure to request the IRS Tax Return Transcript <u>not</u> the IRS Tax Account Transcript</i>
TANF	Y or N	
WIC	Y or N	
Social Security (SSI/SSDI)	Y or N	
Subsidized Housing	Y or N	
Child Support Received	Y or N	
Cash Support*	Y or N	
In-Kind* Support	Y or N	
Other: _____	Y or N	

* **In kind support** means that you used someone else's resources as a means of living—i.e. you lived at your grandmother's house and used her utilities. **Cash support received or paid on your behalf** means that you had bills in your name but someone else either gave you the money to pay those bills or someone else paid them on your behalf.

Comments:

****Additional information and documentation may be required.***

****Please note that if it is determined that you do not provide more than half of the support for your children, you may be required to provide parental information on your FAFSA and to the Office of Financial Aid.***

MASTER'S PROGRAM VERIFICATION

You reported on your FAFSA that you will be pursuing a Master's and doctorate programs (such as an MA, MBA, MD, JD, PhD, EdD, graduate certificate, etc.).

At the beginning of the school year, will you have your bachelor's degree?

Yes ___ No ___

At the beginning of the school year, will you be working on a master's or doctorate program?

Yes ___ No ___

If you will be working on a master's or graduate program, indicate program: _____

DEPENDENTS OTHER THAN YOUR CHILD OR SPOUSE

On your FAFSA, you reported that you have dependents other than your child or spouse who live with you (not your parents) who received more than half of their support from you when you filed your FAFSA and will continue to live with you and receive your support through June 30, 2017.

Do you have dependents that live with you and receive more than half of their support from you*?

Yes ___ No ___

If yes, please complete the following:

Name	Age	Relationship

**Additional information and documentation may be required.*

ACTIVE DUTY IN THE US ARMED FORCES

You are currently serving on active duty in the U.S. Armed Forces for purposes other than training.

- Provide a copy of your Active Duty Orders indicating active duty service in the U.S. Armed Forces.

VETERAN

You are a veteran of the U.S. Armed Forces.

- Submit a copy of your DD214 form indicating release under a condition other than dishonorable for one of the following: active duty service in the U.S. Armed Forces or National Guard, Reserve enlistee called to active duty for purposes other than training, or cadet, or midshipman at a service academy.

MARITAL STATUS VERIFICATION

You reported that you were married at the time of FAFSA submission.

- Submit a copy of your marriage certificate.

DECEASED PARENT'S

Deceased parent's means that you have no living parent (biological or adoptive). You will be required to provide death certificates for each parent.

Since you turned 13, are both of your parents deceased (biological or adoptive)?

Yes___ No___

Can you provide a court document or letter from your social worker verifying this status?
(If yes, attach verification)

Yes___ No___

FOSTER CARE VERIFICATION

You may have reported on the FAFSA application that since you turned age 13, you were in foster care.

Were you in foster care at any time since you turned 13 years old?

Yes ___ No ___

Can you provide a court document or letter from your social worker verifying this status?
(If yes, attach verification)

Yes ___ No ___

WARD OF THE COURT VERIFICATION

You may have reported on the FAFSA application that since you turned age 13, you were a Ward of the Court. You are considered a Ward of the Court if your parent(s) were unable to care for you as a minor, the state or court took legal custody of you, and you were removed from the custody of your parent(s) for your protection. Note: For federal state aid purposes, someone who was incarcerated is not considered a Ward of the Court.

At any time since you turned age 13, were you a Dependent or Ward of the Court?

Yes ___ No ___

Can you provide a court document or letter from your social worker verifying this status?
(If yes, attach verification)

Yes ___ No ___

EMANCIPATED MINOR VERIFICATION

The court must be located in your state of legal residence at the time the court's decision was issued. The court's decision must still be in effect if you are still a minor or must have been in effect at the time you became an adult.

Are you or were you an emancipated minor as determined by a court in your state of legal residence?

Yes ___ No ___

Can you provide a court document verifying this status?
(If yes, attach verification)

Yes ___ No ___

LEGAL GUARDIANSHIP VERIFICATION

The court must be located in your state of legal residence at the time of the court's decision was issued. The court's decision must still be in affect if you are still a minor or must have been in effect at the time you became an adult.

Are you or were you in legal guardianship as determined by a court in your state of legal guardianship?

Yes__ No__

Can you provide a court document verifying this status?
(If yes, attach verification)

Yes__ No__

HOMELESS

"Homeless" means lacking a fixed, regular and adequate housing, which includes living in shelters, motels or cars, or temporarily living with other people because you were unable to find adequate housing.

"Unaccompanied Minor" means you are not living in the physical custody of your parent or guardian.

"Youth" means you are 21 years of age or younger, or you are still enrolled in high school as of the day you signed the FAFSA.

Unaccompanied Youth who was homeless determined by the school

At any time on or after July 1, 2015, did your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless?

Yes__ No__

Unaccompanied Youth who was homeless determined by HUD

At any time on or after July 1, 2015, did the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development (HUD) determine that you were an accompanied youth who was homeless or were self-supporting and at risk of being homeless ?

Yes__ No__

Unaccompanied Youth who was at risk of being homeless

At any time on or after July 1, 2015, did the director of a runaway or homeless youth basic center or transitional living program determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless?

Yes__ No__

Please provide a typed personal statement outlining your circumstances. If you do not have a determination as outlined above, but believe you are an unaccompanied youth who is homeless or are an unaccompanied youth providing for your own living expenses who is at risk of being homeless, please attach a notarized letter from a person you temporarily lived with or knows your situation.

By signing this form you certify that the information you reported is complete. If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail or both.

Student's Signature

Date

***Please submit to the UDC Financial Aid Office
Flagship Campus, Bldg. 39, Suite A-133 or at Community College 801 North Capitol, 3rd Fl, Rm. 305
Fax: 202-274-6060, EMAIL: finaid@udc.edu***

**Mailing Address
UDC-Office of Financial Aid
4200 Connecticut Ave. NW
Bldg. 39, Suite A-133
Washington, DC 20008**