

DEPENDENCY STATUS CERTIFICATION

Academic Year 2009–2010

DIRECTIONS—Additional documentation is required to support responses provided on your Free Application for Federal Student Aid (FAFSA). Please complete this form, attach all requested documents, and return to One Stop Student Services. Processing of your financial aid is on hold until this certification is submitted.

Return this form

By mail to:

One Stop Student Services
University of Minnesota, Twin Cities
200 Fraser Hall, 106 Pleasant St. SE
Minneapolis, MN 55455-0422

On campus at:

200 Fraser Hall, East Bank
130 West Bank Skyway, West Bank
130 Coffey Hall, St. Paul

Questions?

Phone: 612-624-1111
TTY (hearing impaired): 612-626-0701
E-mail: helpingu@umn.edu

To complete online, open in Adobe Reader (free at Adobe.com), not a Web browser, to protect your private information. Place the cursor in a field and type. Print each page when completed. Add the required signature(s) in blue or black ink.

SECTION A. Student information		
Student name (Last, first, MI)		University ID
Phone number (include area code)	Birth date (MM/DD/YYYY)	University e-mail
SECTION B. Dependency information		
For each question, check the box to indicate your answer.		
Is your father deceased?.....		<input type="checkbox"/> yes <input type="checkbox"/> no
Is your mother deceased?.....		<input type="checkbox"/> yes <input type="checkbox"/> no
When you were age 13 or older, were you in foster care? If yes, attach documentation from your social worker or a court of law.....		<input type="checkbox"/> yes <input type="checkbox"/> no
When you were age 13 or older, were you a ward of the court? If yes, attach documentation from a court of law.....		<input type="checkbox"/> yes <input type="checkbox"/> no
You are/were an emancipated minor? If yes, attach documentation from a court of law in your state of legal residence.....		<input type="checkbox"/> yes <input type="checkbox"/> no
You are/were in legal guardianship? If yes, attach documentation from a court of law in your state of legal residence.....		<input type="checkbox"/> yes <input type="checkbox"/> no
After July 1, 2008, you received a determination under the McKinney-Vento Act that you were an unaccompanied youth who was homeless or at risk of being homeless? If yes, attach a copy of the determination.....		<input type="checkbox"/> yes <input type="checkbox"/> no
SECTION C. Student certification		
<p>You must sign this form certifying that the information you provided is complete and correct. Misrepresentation of facts in connection with this form may be sufficient cause, in and of itself, for cancellation or repayment of financial aid, whenever discovered. If you purposely give false or misleading information on this form, you may be fined, sentenced to jail, or both.</p>		
Student signature		Date



To request copies of this form in an alternative format, please call the Disabilities Services liaison for financial aid at 612-625-9578. The University of Minnesota is an equal opportunity employer and educator.