

University of the Incarnate Word Office of Financial Assistance 2020-2021 Student Dependency Status

San Antonio, TX 78209 Phone: (210) 829-6008 Fax: (210) 283-5053 finaid@uiwtx.edu www.uiw.edu/finaid Revised 11/2019

4301 Broadway, Box 308

CODE: DEPD01

(Black Ink Only)

Student Name:	ID Number:	Pnone:
The Department of Education considers a student to be order to verify your dependent/independent status, ple documentation.		
Is your father deceased?		[] Yes [] No
Is your father deceased? If yes , attach copy of death certificate. Contact	t us if unable to obtain document	ation.
Is your mother deceased? If yes , attach copy of death certificate. Contact		[] Yes [] No
If yes, attach copy of death certificate. Contac	t us if unable to obtain document	ation.
At any time on or after you turned age 13, were you in	n foster care?	[] Yes [] No
If yes , attach documentation from your social	worker or court of law.	
At any time on or after you turned age 13, were you a	ward of the court?	[] Yes [] No
If yes, attach documentation from your county	social worker or court of law.	
Are/were you an emancipated minor as determined by	a court of law?	[] Yes [] No
If yes, attach documentation from a court of la		
Are/were you in legal guardianship?		[] Yes [] No
Are/were you in legal guardianship? If yes , attach documentation from a court of la are not the same status as legal guardianship in		e. Please note, joint conservatorships
After July 1, 2019 did you receive determination that		
supporting and at risk of homelessness (e.g. McKinne	y-Vento)?	[] Yes [] No
If yes, attach a copy of the determination from	the housing authority, your high	school, etc.
Are you self-supporting and at risk of homelessness?_		[] Yes [] No
If yes , attach a personal statement, a statement documentation.	t from a third party, along with a	ny available supporting
If none of the categories above apply to you, you are parent signature on the FAFSA. Please go online to mindependent, you may submit a letter and documentate Decisions made by the Office of Financial Assistance	ww.fafsa.ed.gov and correct you tion of your specific situation to l	r FAFSA. If you feel you are be considered for a possible override.
Student Certification:		
I certify that the information above is true and correct financial aid monies received due to inaccurate, false		
Student Signature:	Date:	