



**2018-2019
STATUS CONFIRMATION**

You answered “Yes” on your 2018-2019 Free Application for Federal Student Aid (FAFSA) to one or more of the statements below. Please read each statement carefully and complete the following steps:

- 1. Place a check mark by the statement(s) that applies to you.
- 2. Provide the documents requested for that statement.
- 3. Sign this document and return both this form and the documentation to: Financial Aid Office
Columbus State University, 4225 University Avenue, Columbus, GA 31907 or fax to 706-568-2230

____ **Since I turned age 13, both of my parents were deceased.**

Documents required – A copy of each parents’ death certificate.

____ **Since I turned age 13, I was in foster care.**

Document required – A statement from the Department of Family and Children Services (on agency letterhead) indicating you were a foster child and the period of time of foster care.

____ **Since I turned age 13, I was a dependent or ward of the court.**

Document required – A copy of a court’s decision indicating you were a dependent or a ward of that court and indicates the period of time of this status.

____ **I am/was an emancipated minor. This status was determined by a court in my state of legal residence before I reached age 18.** Document required – A copy of a court’s decision indicating you are/were an emancipated minor and indicates the date of this determination.

____ **I am/was in legal guardianship. This status was determined by a court in my state of legal residence before I reached age 18.** Note: This status is not applicable if the court decision was not in effect at the time you reached age 18 or you are still a minor and the court decision is no longer in effect.

Document required – A copy of a court’s decision indicating you are/were in legal guardianship and the period of time of this status.

____ **On or after 7/1/17 and while I was under the age of 22, a director of a runaway or homeless youth basic center or transitional living program determined that I was homeless or self-supporting and at risk of being homeless.**

Document required – A statement (on agency letterhead) from a director of a runaway or homeless youth basic center or transitional living program indicating you were determined to be homeless or self-supporting and at risk of being homeless and when the determination was made.

____ **On or after 7/1/17 and while I was under the age of 22, my high school or school district homeless liaison, a director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development determined that I was an unaccompanied youth who was homeless.**

Document required – A statement (on the agency’s letterhead) from your high school or school district homeless liaison, or a director of an emergency shelter or transitional housing program indicating you were determined to be an unaccompanied youth who was homeless and when the determination was made.

Student Signature

CSU ID

Date

REQUIRED DOCUMENTS MUST BE ATTACHED TO THIS SIGNED FORM.

If you indicated a “Yes” answer on these statements in error on your 2018-2019 FAFSA, please correct the information at www.fafsa.ed.gov and provide parent’s income information and signatures.