

Umpqua Community College Financial Aid Office PO Box 967 Roseburg, Oregon 97470 541.440.4602 | 541.440.4612 (FAX) FinancialAid@umpqua.edu

## 2022-2023 Dependency Status Documentation

Student Name	Student ID		
-	2-2023 FAFSA, you indic provide the document/s	ated that you are an independent student listed.	. Please check the appropriate box
	during this time.	of 13, <u>both</u> my parents were deceased. Check y of Death Certificates	box even if you were adopted
	<ul> <li>At any time since the age of 13, I lived in foster care. Check box even if you do not live in foster care at this time.</li> <li>REQUIRED: Copy of Order Verifying Foster Care</li> </ul>		
	At any time since the age of 13, I became an orphan or ward of the court. Check box even if you are no longer a dependent or ward of the court. (Being remanded to a correctional facility does not mean that you were declared a ward of the court.)  REQUIRED: Copy of Order Verifying Ward of the Court		
	☐ I am now or was an emancipated minor as determined by a court in my state of legal residence.  REQUIRED: Copy of Order of Emancipation		
	even if you were adopted	guardianship as determined by a court in my sta during this time. y of Letters of Guardianship	ate of legal residence. Check box
	supporting and at risk of b	aly 1, 2021, I was an unaccompanied youth who being homeless as determined by my high schoo er from school's Homeless Education Liaison ver	ol or school district liaison.
	supporting and at risk of transitional housing progr	uly 1, 2021, I was an unaccompanied youth who being homeless as determined by the director of ram funded by the U.S. Department of Housing er from emergency shelter verifying status	of an emergency shelter or
	supporting and at risk of basic center or transitional	uly 1, 2021, I was an unaccompanied youth who being homeless as determined by the director of al living program. er from runaway shelter or youth center verifyi	of a runaway or homeless youth
	than half of their sup	(other than your children or spouse) who live woport from you, now and through June 30, 2023 Financial Aid: Proof of Dependent Support Forr	?
	certify that the above informo	ation is true and correct. I also understand that if I gi	ive false or misleading information, I may be
Student Signature:			Date: